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ABSTRACT

This report presents basic descriptive statistics on persons with mental retardation and related conditions in state-operated residential facilities on June 30, 1989. The report distinguishes among facilities by size, notably those with 15 or fewer residents and those with 16 or more residents. It also distinguishes between two general classes of state-operated facilities--those designated to be primarily or exclusively for persons with mental retardation and related conditions, and those designated primarily for persons with other disabilities. Part 1 presents population statistics for Fiscal Year 1989, for both small and large facilities. Part 2 presents statistics on the characteristics of residents of residential facilities with 16 or more residents. These statistics focus on age, level of mental retardation, functional characteristics, gender, new admissions, readmissions, discharges, and previous placement. Part 3 places Fiscal Year 1989 statistics within the longitudinal context of data gathered on state institution populations, resident movement, and costs of care since 1950. Appendices contain a copy of the survey form and procedures, assumptions, and limitations in longitudinal data presentation. (Includes 40 references.) (JDD)

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**Persons With Mental Retardation and Related Conditions
in State-Operated Residential Facilities: Year Ending
June 30, 1989 With Longitudinal Trends from 1950 to 1989**

Report #33

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EXECUTIVE SUMMARY

This report presents basic descriptive statistics on persons with mental retardation and related conditions in state-operated residential facilities on June 30, 1989. It also reports comparative longitudinal statistics gathered since 1950. Key findings on the status and changing patterns of state-operated residential services include the following:

- In Fiscal Year 1989, there was an increase in the total number of state-operated residential facilities, although this increase was confined exclusively to facilities serving 15 or fewer persons. These smaller state-operated facilities increased by 18% or 135 total facilities between June 30, 1988 to June 30, 1989. On June 30, 1989 there were reported to be 8 fewer state mental retardation institutions (PRF/MR) than a year earlier, but one additional state institution primarily serving other populations (PRF/Other) that reported residents with mental retardation and related conditions. The number of facilities serving 15 or fewer persons exceeded the number of PRF/MR serving 16 or more persons (894 vs. 288).
- During FY 1989, states had an average daily population of 96,171 persons with mental retardation and related conditions in all state-operated residential facilities. This included 88,691 residents of state institutions for persons with mental retardation and related conditions, an "institution" being defined as having 16 or more residents. It also included 5,875 persons in state-operated group homes for 15 or fewer residents and 1,605 persons with mental retardation in other state-operated institutions, almost exclusively psychiatric facilities. The number of persons with mental retardation and related conditions in all large state institutions (both PRF/MR and PRF/Other) decreased by 3,219 persons (or about 3.4%) between June 30, 1988 and June 30, 1989 to 90,296. This is the lowest number of such persons residing in such facilities since 1934. The rate of decrease and the total population reduction in 1989 were somewhat smaller than in 1988 (4.3% and 4,018 people, respectively). The small PRF/MR reported an increase of 5%.
- The decrease in population of large state-operated residential facilities in Fiscal Year 1989 continued a trend begun in 1968. There was a net decrease in residents of all state-operated facilities of 5.1% from the beginning to the end of the fiscal year, mostly in the large facilities. Between FY 1967 and FY 1989 the daily population of persons with mental retardation and related conditions in all large state-operated institutions decreased by about 60.5% from 228,500 persons to 90,296. Population reductions in PRF/MR over the same period were from 194,650 persons to 88,691 persons (55.5%). These reductions were paralleled by declines in the "placement rates" (residents with mental retardation and related conditions per 100,000 of the general U.S. population) in state-operated institutions. These rates peaked in FY 1965 at 115.8 per 100,000 of the general population, were 115.7 in 1967, and had declined to a rate of 36.4 in FY 1989, only 31% of the 1967 placement rate. The FY 1989 placement rate for PRF/MR (35.7) was less than the rate of 39.3 in FY 1922.
- There has been a continued aging of the resident population in large state institutions for persons with mental retardation and related conditions. The proportion of children and youth (birth to 21 years) has declined dramatically in recent years, from 48.9% of all residents in 1965, to 35.8% in 1977, to 10.5% in 1989). This decrease greatly exceeds the rate of reduction in the proportion of children and youth in the U.S. population. In contrast, there has been a consistent but considerably less dramatic increase in persons 63 years and older, from 3.7% of all residents in 1977 to 6.8% in 1989.
- Over half (52.3%) of PRF/MR residents were between 22 and 39 years. In comparison only 30.5% of the general U.S. population was in the age group. This contrasts with state institution placement of children. Children 14 years and younger made up 2.8% of state institution populations, as compared with 21.6% of the general U.S. population. This high state institution placement rate of younger adults reflects previous decades' higher placement rates of children and youth who have now grown into adulthood,

greatly expanded programs that by design or as a secondary effect keep children and youth at home, continuing use of nursing homes as the primary residential placement for older persons with mental retardation and related conditions, and the increasing shortage, nationwide, of community services for young adults who complete their special education entitlement.

- During the past 25 years, there has been a substantial increase in the severity of disabilities among persons served by large publicly operated residential facilities. In 1964 60.0% of the 179,600 residents of PRF/MR were considered severely or profoundly mentally retarded as compared to 83.2% of 88,700 residents a quarter century later. There was a substantial increase in the proportion of PRF/MR residents with profound mental retardation between 1977 and 1989 (from 45.6% to 63.7%). Despite this the total number of PRF/MR residents with profound mental retardation decreased by over 13,000 during the same period (from 68,900 to 55,500).
- A relatively large proportion of persons currently in public residential facilities have conditions in addition to mental retardation. A reported 41.5% of large PRF/MR residents in 1989 had epilepsy, 21% had cerebral palsy, 6% were deaf and 47% had behavioral disorders.
- Data on the functional characteristics and activities of residents in large PRF/MR indicate a wide range of abilities and disabilities. For example, about 39% of the residents were reported to be able to dress themselves independently, 54% to use the toilet without assistance, and 69% to walk without assistance.
- The average cost in state institutions for persons with mental retardation and related conditions in FY 1989 was \$184.11. This represents an annual increase of 17.4% from the previous year, the largest annual increase since FY 1981. However, this followed a relatively small increase (5.0%) from 1987 to 1988, and the two year average annual increase (11.2%) was almost exactly the average annual increase since 1977. The cost of care provided in PRF/MR has increased dramatically since 1950, from an annual expenditure of \$750 per person to an average of \$67,200 per year in FY 1989. Controlling for changes in the Consumer Price Index, costs per resident in FY 1988 were still 17 times the 1950 cost. These increased costs were associated with a number of factors, including increased regulatory requirements under Medicaid's ICF-MR program, increasing severity of impairment among the populations, increasing staff-to-resident ratios, and increased pay for professional and direct service personnel. Court decisions and settlements in a majority of states requiring substantial improvements in state institution programs have also had a significant impact on costs.
- There has been a great reduction in both in and out movement of residents of large public facilities in recent years. Both the relative rates (i.e., proportion of total population) and the total number of admissions, discharges and deaths among large public facilities residents in 1989 were all at or near their lowest points since 1950. Slightly more first admissions than readmissions were reported in 1989. The 5,337 total admissions (first admissions plus readmissions) in 1989 were only 30% as many as the high of 18,075 reported in 1974. The 6,122 discharges were only about 36% as many as the 16,980 reported in 1979. The 1,180 deaths reported in 1989 were only 32% as many as the 3,635 reported in 1967.
- While there has been a consistent decrease in the out-of-home placement of children in large public facilities, 37.1% of new admissions were in the age range of birth to 21 years. As in previous years new admissions were considerably more likely than current residents to have borderline or mild levels of mental retardation (28% vs. 7%).
- The pattern of readmissions is similar to that of new admissions to PRF/MR. There was a relatively high proportion of persons with borderline/mild mental retardation (27.6% vs. 7.0% in the general PRF/MR population). They also tended to be somewhat younger than the current PRF/MR population.

- Discharges outnumbered total admissions for persons of all levels of mental retardation. The smallest relative difference was among persons with borderline/mild mental retardation (discharges only 5% above total admissions). For persons with profound mental retardation, discharges were 31% more than admissions.
- Most of the PRF/MR new admissions in Fiscal Year 1989 came from other residential settings (51.5%). About one-third (33.7%) came from the homes of family members or foster homes. This rate of placement from family settings has been quite consistent in the past several years. Transfers from other large mental retardation and psychiatric institutions made up 34.8% of new admissions, a statistic which is also consistent with earlier years (34.2% in 1985 and 37.9% in 1987).
- About half (51%) of all persons released from large public facilities were placed in group homes with 15 or fewer residents, 12% to homes of parents or relatives, and 18.1% in large residential facilities. Nursing home placements decreased from 4.1% of releases in 1985 to 2% in 1989.
- States vary somewhat in the functional characteristics of persons served in large PRF/MR facilities. Some states tend to serve populations with somewhat lower levels of disability, probably reflecting availability and development of community programs and differences in reporting practices.
- National trends often obscure important state-by-state variations. Some states are clearly moving toward substantial or complete elimination of large facilities (New Hampshire by early 1991 had attained such an end). Some states are developing small state-operated alternatives as part of their general effort. However most states remain primarily committed to private provision of residential services.

INTRODUCTION

This is the eighth publication since Fiscal Year 1978, in a series of Center for Residential and Community Services (CRCS) reports providing statistics on persons with mental retardation and related conditions in state-operated residential facilities in the United States. Part 1 of this report presents population statistics for Fiscal Year 1989. These statistics were compiled within state agencies, with the exception of a few states for which individual facility data were collected. The data collection in Part 1 represents a somewhat expanded continuation of a statistical program originated in the Office of Mental Retardation Coordination (now the Administration on Developmental Disabilities) in 1968. The current survey has been expanded over the years to include population and cost statistics on "small" state-operated mental retardation facilities (those with 15 or fewer residents) and facilities designated primary for populations other than persons with mental retardation and related conditions, as well as the larger state mental retardation facilities. The addition of "other" state-operated facilities was begun for Fiscal Year 1978, and the small state-operated facilities were added in Fiscal Year 1986.

Part 2 presents statistics on the characteristics of residents of large state-operated residential facilities (16 or more residents) on June 30, 1989. It contains statistics that were gathered through facility surveys of all 288 state-operated residential facilities of 16 or more beds for persons with mental retardation. These facilities included traditional state institutions, other state-operated congregate care facilities of 16 or more residents, and mental retardation units connected with state-operated psychiatric or long-term nursing care facilities. Previous surveys of state-operated facilities of all sizes were conducted in 1977, 1982, and 1985 (Hauber, Bruininks, Hill, Lakin, & White, 1984; Scheerenberger, 1978; White, Lakin, Hill, Wright, & Bruininks 1987). Surveys in 1979, 1981, 1987 (Scheerenberger, 1980, 1982, 1988) and the survey reported here for 1989 include only state-operated facilities with 16 or more residents.

Part 3 of this report places Fiscal Year 1989 statistics described in Part 1 within the longitudinal context of data gathered on state institution populations, resident movement, and costs of care since 1950. A brief historical review of these and other preceding surveys since 1950 can be found in Lakin, Hill, Street,

and Bruininks (1986). For a more detailed review, including surveys and statistics since 1880, see Lakin (1979).

As noted, this report distinguishes among facilities by size, notably those with 15 or fewer residents (1-15) and those with 16 or more residents (16+). It also distinguishes between two general classes of state-operated facility:

Public Residential Facilities/Mental Retardation (PRF/MR) are state-operated (public, in a slightly restricted sense) residential facilities managed and operated by state employees, which as a whole or as distinct administrative units are designated to be primarily or exclusively for persons with mental retardation and related conditions.

Other Public Residential Facilities (PRF/Other) are state-operated (public) residential facilities managed and operated by state employees, which as a whole are designated primarily for persons with disabilities other than mental retardation (in the vast majority of cases, psychiatric facilities), but in which reside one or more persons with a primary diagnosis of mental retardation or a formal dual diagnosis including mental retardation who are not in distinct administrative units for persons with mental retardation.

For the purposes of this report, persons with "mental retardation" are those who have been so designated by their respective state governments as part of the process of placing them in the state residential care system. The formal and currently accepted definition of mental retardation is "significant subaverage general intellectual functioning (generally an I.Q. of 69 or below) existing concurrently with deficits in adaptive behavior, and manifested during the developmental period" (Grossman, 1977, p. 11). "Related conditions" refers to conditions closely associated with mental retardation that cause or significantly contribute to "substantial functional limitations" in areas specified in the federal definition of developmental disabilities.

Persons designated as multiply handicapped (mentally retarded/mentally ill) living in "PRF/Other" present some states with reporting problems, though the problems have become considerably fewer as procedures and data management have improved and the "PRF/Other" population of persons with mental retardation has decreased. Nevertheless, the actual number of persons residing in PRF/Other who have mental retardation may be slightly higher than the number reported in some states.

**PART 1: PERSONS WITH MENTAL RETARDATION AND RELATED CONDITIONS
IN STATE-OPERATED RESIDENTIAL FACILITIES: YEAR ENDING JUNE 30, 1989**

Methodology

The survey questionnaire for State-Operated Residential Facilities, Fiscal Year 1989, was mailed with a cover letter to each state's mental retardation/developmental disabilities program director or the state's designated "data supplier" on March 8, 1990. The questionnaire on state-operated facilities was Part 1 of a three-part survey which also included sections on nonstate facilities and ICF-MR certified facilities. This questionnaire and its cover letter are included in Appendix A. Telephone follow-up began two weeks later to determine which individual(s) within each state agency had been given responsibility for compiling the requested statistics and to answer questions about the data requested. Additional mailings to 20 states were necessary.

Additional follow-up telephone calls to promote initial response and to clarify and edit the statistics on returned questionnaires continued until August 1990, when summaries of the data from the state questionnaires were sent to all states for verification. Corrections and special notes on state data were completed by December 1990. Compiling statistics from states on the three-part survey took an average of five telephone conversations generally involving one to four different people in each state. In eight states contacts were made with both mental retardation and mental health agencies to gather the required statistics for public residential facilities for persons with mental retardation or related conditions (PRF/MR) and public residential facilities for persons with other primary conditions--almost exclusively psychiatric institutions (PRF/Other). In two states data on PRF/MR were obtained from individual state-operated residential facilities. New data collection systems in a few states resulted in some delay in reporting the requested statistics for Fiscal Year 1989. The state agency in Texas was unable to provide some of the data requested for this period but agreed to estimation procedures that are detailed in the *State Notes* in Appendix B.

Response rates for each of the items on the questionnaire are shown in Table 1.1. For PRF/MR, item response rates ranged from 84% to 100% of states reporting, with generally higher rates for statistics on the larger traditional institutions than for the facilities with 15 or fewer residents. Item response rates for

PRF/Other also ranged from 84% to 100%. Data elements of the state agency survey covered the number of facilities and residents, resident movement, and the costs of care. The specific elements and the corresponding definitions for the state agency survey can be found in the survey instrument attached as Appendix A.

Table 1.1
Response Rates by Survey Item and Facility Type, Fiscal Year 1989

<u>Survey Items</u>	<u>% of PRF/MR</u>		<u>% of PRF/Other</u>
	<u>1-15 res.</u>	<u>16+ res.</u>	
1. Number of Facilities	100	100	100
2. Residents Beginning of Year (July 1, 1988)	98	100	98
3. Average Daily Residents (Fiscal Year)	100	100	94
4. Residents End of Year (June 30, 1989)	98	100	100
5. First Admissions During Year	90	90	84
6. Readmissions During Year	84	84	86
7. Live Releases During Year	88	88	86
8. Deaths During Year	90	90	84
9. Per Diem Cost	94	100	94

In recent years every state has increased efforts to place residents of large state facilities into smaller, community-based residential settings. To assist in the effort several states have established state-operated group homes and/or semi-independent living arrangements. For the fourth year, in addition to collecting data on state institution and state hospital populations, this survey also collected data from each state on residents of state-operated facilities with 15 or fewer residents, frequently referred to as "small" in this report. A further breakdown of data on small facilities into sizes 1-6 and 7-15 was requested, and all states provided these data on the number of facilities and residents.

Limitations are encountered when gathering statistics at the state level. Most notable among these are the variations in the types of statistics maintained by the various states, in other instances in the specific operational definitions governing certain data elements. For example, several states indicated that they were unable to provide data on first admissions, readmissions, and releases according to the specific survey definitions, while in others, transfers between state-operated facilities, and respite care placements could not be separated from other movement as the survey instructions requested. General problems in the collection of the data are presented in the discussion accompanying each table in the body of the report. Specific state

idiosyncracies are reported in the *State Notes* in Appendix B. Although these variations are noted, it is not likely that they have a substantial effect on national or state totals or on the longitudinal trends presented in this report.

Findings and Discussion

The following eleven tables and accompanying discussion summarize the statistics reported on state-operated residential facilities for the year ending June 30, 1989. The report is organized so that the discussion and accompanying tables are presented side by side. Definitions for each data element as well as the variations and problems in definitions as employed in the various states are noted in the discussion. Each table is also accompanied by a short summary of highlights of the state and national statistics presented.

In the discussion of these statistics, the descriptor "small" and the abbreviation "1-15 res." are used for state-operated facilities with 15 or fewer residents. Data on these small facilities are further broken down into facilities of 1-6 residents and 7-15 residents in most of the tables presented. The descriptor "large" and the abbreviation "16+ res." are used in this report for state-operated facilities with 16 or more residents. No distinction is made for "large" or "small" PRF/Other, as all are assumed to be large, that is to have 16 or more residents.

In the tables of this report a common set of symbols is used for estimated or unavailable statistics. These symbols are:

- DNF* "Data Not Furnished" is used where states were unable to report the specific type of data requested. It is assumed that this number is larger than zero, but it is unknown.
- (e)* "Estimated" data have been provided where exact statistics were not available. It is assumed that these state estimates represent the best available information under existing circumstances.
- N/A* "Not Applicable" is used where no data are reported in a particular cell of the table because a specific category of facility is not used in a state. It is the equivalent of "0," and is used only where the value "0" would have distorted averaged statistics.

Number of State-Operated Residential Facilities

Table 1.2 presents statistics by state on the number of state-operated residential facilities serving persons with mental retardation and related conditions in the United States on June 30, 1989. Separate counts are provided for facilities serving persons with mental retardation and related conditions in PRF/MR with 15 or fewer residents (1-15), further summarized by sizes 1-6 residents and 7-15 residents; PRF/MR with 16 or more residents; PRF/Other; and total state-operated facilities.

On June 30, 1989, states reported a total of 1,305 state-operated residential facilities serving persons with mental retardation and related conditions. Of these 1,182 were PRF/MR and 123 were PRF/Other. Of the 1,182 PRF/MR, 894 had 15 or fewer residents; 288 had 16 or more residents. All states operated at least one large PRF/MR on June 30, 1989 (New Hampshire has subsequently closed its PRF/MR); 15 states operated at least one small PRF/MR. Twenty-four states reported at least one PRF/Other housing persons with mental retardation in units not specifically for persons with mental retardation and related conditions. The total of 894 small state-operated facilities on June 30, 1989, represented an increase of about 18% (135 facilities) between June 30, 1988 and June 30, 1989, although some of the change reflects improved reporting in Arizona, Massachusetts, and Mississippi. It is projected that the development of small state-operated residential programs will continue, at least for the near future (see Lakin, Jaskulski, Hill, Bruininks, Menke, White, & Wright, 1989). The greatest number of small PRF/MR were operated by New York (529 facilities) and Texas (81 facilities), which together had 68% of all small state-operated facilities on June 30, 1989.

The number of large state-operated facilities has remained relatively stable during the past several years. However, between June 30, 1988 and June 30, 1989 the number of large PRF/MR decreased by eight while the reported number of PRF/Other increased by one. Arizona, Kansas, Michigan, New York, Ohio, Pennsylvania, South Carolina, and West Virginia reported fewer large PRF/MR than in Fiscal Year 1988. Increases of one large PRF/MR were reported by Texas and the District of Columbia as a result of reclassification of previously operating PRF/Other with distinct mental retardation units into the PRF/MR category.

Table 1.2
Number of State-Operated Residential Facilities Serving
Persons with Mental Retardation and Related Conditions on June 30, 1989 by State

State	Small PRF/MR			Large PRF			Total State-Operated Facilities
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other	Large Total	
ALABAMA	0	0	0	5	0	5	5
ALASKA	0	0	0	1	1	2	2
ARIZONA	36	4	40	2	1	3	43
ARKANSAS	0	0	0	6	0	6	6
CALIFORNIA	0	0	0	7	0	7	7
COLORADO	0	36	36	3	0	3	39
CONNECTICUT	35	35	70	13	7	20	90
DELAWARE	0	0	0	1	0	1	1
D.C.	0	0	0	2	0	2	2
FLORIDA	0	0	0	6	4	10	10
GEORGIA	0	0	0	8	4	12	12
HAWAII	0	0	0	2	0	2	2
IDAHO	0	0	0	1	0	1	1
ILLINOIS	0	0	0	13	6	19	19
INDIANA	0	0	0	9	0	9	9
IOWA	0	0	0	2	6	8	8
KANSAS	0	0	0	3	0	3	3
KENTUCKY	0	0	0	4	4	8	8
LOUISIANA	5	0	5	9	0	9	14
MAINE	0	2	2	2	2	4	6
MARYLAND	0	1	1	7	9	16	17
MASSACHUSETTS	0	38	38	7	10	17	55
MICHIGAN	0	0	0	7	0	7	7
MINNESOTA	7	0	7	7	2	9	16
MISSISSIPPI	55	3	58	5	0	5	63
MISSOURI	0	2	2	10	10	20	22
MONTANA	0	0	0	2	1	3	3
NEBRASKA	0	0	0	1	0	1	1
NEVADA	0	0	0	2	0	2	2
NEW HAMPSHIRE	0	0	0	2	0	2	2
NEW JERSEY	0	0	0	9	6	15	15
NEW MEXICO	0	0	0	2	0	2	2
NEW YORK	133	396	529	35	29	64	593
NORTH CAROLINA	0	0	0	6	0	6	6
NORTH DAKOTA	0	1	1	1	1	2	3
OHIO	0	0	0	18	0	18	18
OKLAHOMA	0	0	0	3	0	3	3
OREGON	0	0	0	2	0	2	2
PENNSYLVANIA	0	0	0	13	0	13	13
RHODE ISLAND	13	10	23	2	1	3	26
SOUTH CAROLINA	0	1	1	4	0	4	5
SOUTH DAKOTA	0	0	0	2	1	3	3
TENNESSEE	0	0	0	5	5	10	10
TEXAS	36	45	81	18	0	18	99
UTAH	0	0	0	1	0	1	1
VERMONT	0	0	0	1	0	1	1
VIRGINIA	0	0	0	5	9	14	14
WASHINGTON	0	0	0	6	2	8	8
WEST VIRGINIA	0	0	0	2	0	2	2
WISCONSIN	0	0	0	3	2	5	5
WYOMING	0	0	0	1	0	1	1
U.S. Total	320	574	894	288	123	411	1,305

***Average Daily Population of Persons With Mental Retardation and
Related Conditions in State-Operated Residential Facilities***

Table 1.3 presents the average daily population of persons with mental retardation and related conditions living in large and small PRF/MR and PRF/Other in Fiscal Year 1989. For two states unable to furnish average daily resident data for a particular category, the June 30, 1989 population in that category was used as the best estimate.

During FY 1989 states had an average daily population of 96,171 persons with mental retardation and related conditions in all state-operated residential facilities. This included 5,875 in small PRF/MR, 88,691 in large PRF/MR, and 1,605 in PRF/Other categories. In FY 1988 the average daily population of people with mental retardation and related conditions in all state facilities was 99,095, including 91,582 residents of large PRF/MR, 1,933 residents of PRF/Other and 5,580 residents in small PRF/MR. Between June 30, 1988 and June 30, 1989 the total number of persons with mental retardation and related conditions in large state-operated facilities (both PRF/MR and PRF/Other) decreased by 3,219 persons (or about 3.4%). During the same period the average daily population of persons with mental retardation and related conditions in small PRF/MR increased by about 5%, due in part to improved reporting by Arizona and Massachusetts. Thirty-six states did not directly operate small residential programs, although large numbers of smaller private facilities in these states are operated with state funding and general state oversight.

As has been the case each year for the past 20 years, there was a decrease in average daily population of persons with mental retardation and related conditions in large state-operated facilities between Fiscal Year 1988 and Fiscal Year 1989, although the rate of decrease was somewhat smaller than in recent years (e.g., 4.1% in 1988 as compared with 3.4% in 1989). Decreases were again evident in most states, although 10 states reported the same or increasing total populations in large PRF/MR and PRF/Other combined. All increases were 4% or less; six were 1% or less. Over one third (33,555) of the total U.S. daily average number of persons in state-operated facilities in this study resided in the states of California, New Jersey, New York, and Texas. In addition to having 61% of small PRF/MR residents, New York had 10% of all residents of large PRF/MR and PRF/Other residential programs.

Table 1.3
Average Daily Population of Persons with Mental Retardation and Related
Conditions in State-Operated Residential Facilities in Fiscal Year 1989 by State

State	Small PRF/MR			Large PRF			Total State- Operated Facilities
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other	Large Total	
ALABAMA	0	0	0	1,301	0	1,301	1,301
ALASKA	0	0	0	57	1	58	58
ARIZONA	125e	51	176e	350e	10e	360	536
ARKANSAS	0	0	0	1,307	0	1,307	1,307
CALIFORNIA	0	0	0	6,811	0	6,811	6,811
COLORADO	0	272e	272e	510e	0	510	782
CONNECTICUT	129	264	393	1,927	34	1,961	2,354
DELAWARE	0	0	0	365e	0	365	365
D.C.	0	0	0	245e	0	245	245
FLORIDA	0	0	0	1,989e	180e	2,169	2,169
GEORGIA	0	0	0	2,071	10	2,081	2,081
HAWAII	0	0	0	191	0	191	191
IDAHO	0	0	0	228	0	228	228
ILLINOIS	0	0	0	4,511	36	4,547	4,547
INDIANA	0	0	0	2,020e	0	2,020	2,020
IOWA	0	0	0	1,043	60e	1,103	1,103
KANSAS	0	0	0	1,092	0	1,092	1,092
KENTUCKY	0	0	0	709	78	787	787
LOUISIANA	30	0	30	2,765	0	2,765	2,795
MAINE	0	26	26	283	34e	317	343
MARYLAND	0	11	11	1,385	75e	1,460	1,471
MASSACHUSETTS	0	350e	350e	3,100	136e	3,236	3,586
MICHIGAN	0	0	0	1,338	0	1,338	1,338
MINNESOTA	28	0	28	1,443	65	1,508	1,536
MISSISSIPPI	152	27	179	1,486	0	1,486	1,665
MISSOURI	0	15	15	1,870e	50e	1,920	1,935
MONTANA	0	0	0	240	8	248	248
NEBRASKA	0	0	0	467	0	467	467
NEVADA	0	0	0	173	0	173	173
NEW HAMPSHIRE	0	0	0	131	0	131	131
NEW JERSEY	0	0	0	5,178	158e	5,336	5,336
NEW MEXICO	0	0	0	498	0	498	498
NEW YORK	403	3,173	3,576	8,843	435	9,278	12,854
NORTH CAROLINA	0	0	0	2,722	0	2,722	2,722
NORTH DAKOTA	0	10	10	253	23	276	286
OHIO	0	0	0	2,839	0	2,839	2,839
OKLAHOMA	0	0	0	1,019	0	1,019	1,019
OREGON	0	0	0	1,021	0	1,021	1,021
PENNSYLVANIA	0	0	0	4,176	0	4,176	4,176
RHODE ISLAND	72	106	178	243	43e	286	464
SOUTH CAROLINA	0	10	10	2,376	0	2,376	2,386
SOUTH DAKOTA	0	0	0	421	15e	435	435
TENNESSEE	0	0	0	1,965	52	2,017	2,017
TEXAS	205e	416e	621e	1,933e	0	7,933	8,554
UTAH	0	0	0	501	0	501	501
VERMONT	0	0	0	183	0	183	183
VIRGINIA	0	0	0	2,760	42	2,802	2,802
WASHINGTON	0	0	0	1,795	28e	1,823	1,823
WEST VIRGINIA	0	0	0	390e	0	390	390
WISCONSIN	0	0	0	1,757e	32e	1,789	1,789
WYOMING	0	0	0	411	0	411	411
U.S. Total	1,144	4,731	5,875	88,691	1,605	90,296	96,171

***Average Daily Population of Persons With Mental Retardation and Related Conditions
in State-Operated Residential Facilities per 100,000 of the General Population***

Table 1.4 presents the average daily population of persons with mental retardation and related conditions in state-operated residential facilities for Fiscal Year 1989 per 100,000 of state and national populations on July 1, 1989. This statistic is referred to here as the "placement rate."

For Fiscal Year 1989 the national placement rate for all state-operated facilities was 38.8 compared to 40.4 one year earlier. Contributing to the decrease in the placement rate for all state-operated facilities was the decrease in the national placement rate for all large facilities (from 38.1 in 1988 to 36.4 in 1989). This included decreases for both large PRF/MR (from 37.3 in 1988 to 35.7 in 1989) and for PRF/Other (from 0.8 in 1988 to 0.6 in 1989). During the same period the national placement rate for small PRF/MR increased from 2.3 to 2.4.

The national decrease in placement rate between Fiscal Years 1988 and 1989 in large state-operated facilities was evident in most states. Small increases in the placement rate occurred in Indiana, Iowa, Kentucky, Maine, Texas and in Wyoming. Rates in Arkansas, Florida, Louisiana, Missouri, Montana, and Nebraska remained essentially the same. The District of Columbia showed the largest decrease in large facility placement rate (from 58.8 in 1988 to 40.6 in 1989). Other states that experienced a decrease of 5 or more per 100,000 population were Connecticut, Massachusetts, New York, North Dakota, and West Virginia.

The highest placement rate in large state facilities for Fiscal Year 1989 was in Wyoming (86.5) due partly to a decrease in general population. Other states showing placement rates of 60 or more per 100,000 were Louisiana (63.1), South Dakota (60.8), Connecticut (60.5), South Carolina (67.7) and New Jersey (69.0). The states with the lowest placement in large state-operated facilities in 1989 were Alaska, Arizona, Colorado, Hawaii, Nevada, New Hampshire, Florida, and Michigan, all below 20 per 100,000. Although Arizona had the lowest large PRF placement rate in Fiscal Year 1989 (10.1), New Hampshire (11.8 in fiscal Year 1989) has subsequently closed its PRF to persons with mental retardation and related conditions. The highest placement rates in small state-operated facilities were in New York (19.9) and Rhode Island (17.8). The highest placement rate in state-operated facilities of 6 or fewer residents was in Rhode Island (7.2).

Table 1.4
Average Daily Population of Persons with Mental Retardation and Related Conditions
in State-Operated Residential Facilities per 100,000 of the General Population in Fiscal Year 1989

State	7/1/89 State Pop.	Average Daily Residents						Placements per 100,000					
		Small PRF/MR			Large PRF			Small PRF/MR			Large PRF		
		1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/ Other	Large Total	1-6	7-15	1-15	PRF/MR 16+	PRF/ Other	Large Total
AL	41.18	0	0	0	1,301	0	1,301	0.0	0.0	0.0	31.6	0.0	31.6
AK	5.27	0	0	0	57	1	58	0.0	0.0	0.0	10.8	0.2	11.0
AZ	35.56	125e	51	176e	350e	10e	360	3.5	1.4	4.9	9.8	0.3	10.1
AR	24.06	0	0	0	1,307	0	1,307	0.0	0.0	0.0	54.3	0.0	54.3
CA	290.63	0	0	0	6,811	0	6,811	0.0	0.0	0.0	23.4	0.0	23.4
CO	33.17	0	272e	272e	510e	0	510	0.0	8.2	8.2	15.4	0.0	15.4
CT	32.39	129	264	393	1,927	34	1,961	4.0	8.2	12.1	59.5	1.0	60.5
DE	6.73	0	0	0	365e	0	365	0.0	0.0	0.0	54.2	0.0	54.2
DC	6.04	0	0	0	245e	0	245	0.0	0.0	0.0	40.6	0.0	40.6
FL	126.71	0	0	0	1,989e	180e	2,169	0.0	0.0	0.0	15.7	1.4	17.1
GA	64.36	0	0	0	2,071	10	2,081	0.0	0.0	0.0	32.2	0.2	32.3
HI	11.12	0	0	0	191	0	191	0.0	0.0	0.0	17.2	0.0	17.2
ID	10.14	0	0	0	228	0	228	0.0	0.0	0.0	22.5	0.0	22.5
IL	116.58	0	0	0	4,511	36	4,547	0.0	0.0	0.0	38.7	0.3	39.0
IN	55.93	0	0	0	2,020e	0	2,020	0.0	0.0	0.0	36.1	0.0	36.1
IA	28.40	0	0	0	1,043	60e	1,103	0.0	0.0	0.0	36.7	2.1	38.8
KS	25.13	0	0	0	1,092	0	1,092	0.0	0.0	0.0	43.5	0.0	43.5
KY	37.27	0	0	0	709	78	787	0.0	0.0	0.0	19.0	2.1	21.1
LA	43.82	30	0	30	2,765	0	2,765	0.7	0.0	0.7	63.1	0.0	63.1
ME	12.22	0	26	26	283	34e	317	0.0	2.1	2.1	23.2	2.8	25.9
MD	46.94	0	11	11	1,385	75e	1,460	0.0	0.2	0.2	29.5	1.6	31.1
MA	59.13	0	350e	350e	3,100e	136e	3,236	0.0	5.9	5.9	52.4	2.3	54.7
MI	92.73	0	0	0	1,338	0	1,338	0.0	0.0	0.0	14.4	0.0	14.4
MN	43.53	28	0	28	1,443	65	1,508	0.6	0.0	0.6	33.1	1.5	34.6
MS	26.21	152	27	179	1,486	0	1,486	5.8	1.0	6.8	56.7	0.0	56.7
MO	51.59	0	15	15	1,870e	50e	1,920	0.0	0.3	0.3	36.2	1.0	37.2
MT	8.06	0	0	0	240	8	248	0.0	0.0	0.0	29.8	1.0	30.8
NE	16.11	0	0	0	467	0	467	0.0	0.0	0.0	29.0	0.0	29.0
NV	11.11	0	0	0	173	0	173	0.0	0.0	0.0	15.6	0.0	15.6
NH	11.07	0	0	0	131	0	131	0.0	0.0	0.0	11.8	0.0	11.8
NJ	77.35	0	0	0	5,178	158e	5,336	0.0	0.0	0.0	66.9	2.0	69.0
NM	15.28	0	0	0	498	0	498	0.0	0.0	0.0	32.6	0.0	32.6
NY	179.50	403	3,173	3,576	8,843	435	9,278	2.2	17.7	19.9	49.3	2.4	51.7
NC	65.71	0	0	0	2,722	0	2,722	0.0	0.0	0.0	41.4	0.0	41.4
ND	6.60	0	10	10	253	23	276	0.0	1.5	1.5	38.3	3.5	41.8
OH	109.07	0	0	0	2,839	0	2,839	0.0	0.0	0.0	26.0	0.0	26.0
OK	32.24	0	0	0	1,019	0	1,019	0.0	0.0	0.0	31.6	0.0	31.6
OR	28.20	0	0	0	1,021	0	1,021	0.0	0.0	0.0	36.2	0.0	36.2
PA	120.40	0	0	0	4,176	0	4,176	0.0	0.0	0.0	34.7	0.0	34.7
RI	9.98	72	106	178	243	43e	286	7.2	10.6	17.8	24.3	4.3	28.7
SC	35.12	0	10	10	2,376	0	2,376	0.0	0.3	0.3	67.7	0.0	67.7
SD	7.15	0	0	0	420	15e	435	0.0	0.0	0.0	58.7	2.1	60.8
TN	49.40	0	0	0	1,965	52	2,017	0.0	0.0	0.0	39.8	1.1	40.8
TX	169.91	205e	416e	621e	7,933e	0	7,933	1.2	2.4	3.7	46.7	0.0	46.7
UT	17.07	0	0	0	501	0	501	0.0	0.0	0.0	29.3	0.0	29.3
VT	5.67	0	0	0	183	0	183	0.0	0.0	0.0	32.3	0.0	32.3
VA	60.98	0	0	0	2,760	42	2,802	0.0	0.0	0.0	45.3	0.7	45.9
WA	47.61	0	0	0	1,795	28e	1,823	0.0	0.0	0.0	37.7	0.6	38.3
WV	18.57	0	0	0	390e	0	390	0.0	0.0	0.0	21.0	0.0	21.0
WI	48.67	0	0	0	1,757	32e	1,789	0.0	0.0	0.0	36.1	0.7	36.8
WY	4.75	0	0	0	411	0	411	0.0	0.0	0.0	86.5	0.0	86.5
U.S.	2482.43	1,144	4,731	5,875	88,691	1,605	90,296	0.5	1.9	2.4	35.7	0.6	36.4

***Persons With Mental Retardation and Related Conditions in
State-Operated Facilities at the Beginning and End of the Year***

Tables 1.5, 1.6 and 1.7 present statistics on the number of persons with mental retardation and related conditions living in state-operated facilities on the first and last days of Fiscal Year 1989. Table 1.5 presents statistics on the number of persons with mental retardation and related conditions in small PRF/MR (15 or fewer residents), large PRF/MR (16 or more residents), and PRF/Other on July 1, 1988 (the first day of Fiscal Year 1989). The small facilities are further classified into 1-6 residents and 7-15 residents. Because Massachusetts did not report PRF/Other populations and Texas did not report small PRF/MR populations for July 1, 1988, statistics for June 30, 1988 (from the previous year's survey), have been substituted. Table 1.6 presents the same statistics for the same categories of state-operated facilities on June 30, 1989 (the last day of Fiscal Year 1989). Table 1.7 presents statistics on the net change in the number of residents with mental retardation and related conditions in large and small PRF/MR and in PRF/Other from July 1, 1988 to June 30, 1989.

As shown most clearly in Table 1.7, there was a consistent tendency for states to reduce the number of persons with mental retardation and related conditions living in large PRF/MR and PRF/Other during Fiscal Year 1989. Overall, nationally there was a decrease of 5.2% in the population of large state-operated facilities from the beginning to the end of Fiscal Year 1989. Illinois showed a .6% increase in large state facility populations over that period; no change was reported by Georgia, Maine, Montana, and Texas.

Twelve states reported a net reduction of more than 10% in the number of persons with mental retardation and related conditions in their large state-operated facilities between July 1, 1988 and June 30, 1989. The largest decreases were in West Virginia (29%), North Dakota (19%), and New Hampshire (18%). The reported number of residents in small PRF/MR decreased by about 3% during Fiscal Year 1989 due almost exclusively to a reduction of 360 residents in New York. The number of PRF/Other residents with mental retardation was indicated to have declined about 15% nationally during the year, but some of this change can be attributed to the reclassification of some PRF/Other to PRF/MR, as distinct units for persons with mental retardation were established in facilities that were formerly in the PRF/Other classification.

Table 1.5
Persons with Mental Retardation and Related Conditions in State-Operated
Residential Facilities at the Beginning of Fiscal Year 1989 by State

State	Small PRF/MR			Large PRF			Total State-Operated Facilities
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other	Large Total	
ALABAMA	0	0	0	1,303	0	1,303	1,303
ALASKA	0	0	0	57	2e	59	59
ARIZONA	125e	0	125e	364	15	379	504
ARKANSAS	0	0	0	1,314	0	1,314	1,314
CALIFORNIA	0	0	0	6,825	0	6,825	6,825
COLORADO	0	271	271	531	0	531	802
CONNECTICUT	121	273	394	2,137	34	2,171	2,565
DELAWARE	0	0	0	374	0	374	374
D.C.	0	0	0	256	0	256	256
FLORIDA	0	0	0	1,999	186e	2,185	2,185
GEORGIA	0	0	0	2,080	10	2,090	2,090
HAWAII	0	0	0	210	0	210	210
IDAHO	0	0	0	236	0	236	236
ILLINOIS	0	0	0	4,482	31	4,513	4,513
INDIANA	0	0	0	2,212	0	2,212	2,212
IOWA	0	0	0	1,070	51	1,121	1,121
KANSAS	0	0	0	1,118	0	1,118	1,118
KENTUCKY	0	0	0	757	98	855	855
LOUISIANA	30	0	30	2,801	0	2,801	2,831
MAINE	0	26	26	280	33	313	339
MARYLAND	0	11	11	1,415	106e	1,521	1,532
MASSACHUSETTS	0	205	205	3,219	136e	3,355	3,560
MICHIGAN	0	0	0	1,438	0	1,438	1,438
MINNESOTA	28	0	28	1,471	75	1,546	1,574
MISSISSIPPI	160	27	187	1,496	0	1,496	1,683
MISSOURI	0	15	15	1,889	56	1,945	1,960
MONTANA	0	0	0	242	8	250	250
NEBRASKA	0	0	0	474	0	474	474
NEVADA	0	0	0	173	0	17	173
NEW HAMPSHIRE	0	0	0	144	0	144	144
NEW JERSEY	0	0	0	5,190	128	5,318	5,318
NEW MEXICO	0	0	0	507	0	507	507
NEW YORK	406	3,351	3,757	9,507	572	10,079	13,836
NORTH CAROLINA	0	0	0	2,845	0	2,845	2,845
NORTH DAKOTA	0	11	11	316	20	336	347
OHIO	0	0	0	2,885	0	2,885	2,885
OKLAHOMA	0	0	0	1,186	0	1,186	1,186
OREGON	0	0	0	1,097	0	1,097	1,097
PENNSYLVANIA	0	0	0	4,606	0	4,606	4,606
RHODE ISLAND	71	103	174	261	43e	304	478
SOUTH CAROLINA	0	9	9	2,437	0	2,437	2,446
SOUTH DAKOTA	0	0	0	434	15e	449	449
TENNESSEE	0	0	0	2,017	59	2,076	2,076
TEXAS	205e	416e	621e	7,933e	0	7,933	8,554
UTAH	0	0	0	537	0	537	537
VERMONT	0	0	0	186	0	186	186
VIRGINIA	0	0	0	2,774	72	2,846	2,846
WASHINGTON	0	0	0	1,801	24	1,825	1,825
WEST VIRGINIA	0	0	0	456e	0	456	456
WISCONSIN	0	0	0	1,836	32e	1,868	1,868
WYOMING	0	0	0	419	0	419	419
U.S. Total	1,146	4,718	5,864	91,597	1,806	93,403	99,267

Table 1.6
Persons with Mental Retardation and Related Conditions in
State-Operated Residential Facilities at the End of Fiscal Year 1989 by State

State	Small PRF/MR			Large PRF			Total State-Operated Facilities
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other	Large Total	
ALABAMA	0	0	0	1,295	0	1,295	1,295
ALASKA	0	0	0	57	1	58	58
ARIZONA	125e	51	176e	340	10	350	526
ARKANSAS	0	0	0	1,302	0	1,302	1,302
CALIFORNIA	0	0	0	6,796	0	6,796	6,796
COLORADO	0	276	276	493	0	493	769
CONNECTICUT	139	277	416	1,845	33	1,878	2,294
DELAWARE	0	0	0	356	0	356	356
D.C.	0	0	0	235e	0	235	235
FLORIDA	0	0	0	1,999	180e	2,179	2,179
GEORGIA	0	0	0	2,079	10	2,089	2,089
HAWAII	0	0	0	173	0	173	173
IDAHO	0	0	0	221	0	221	221
ILLINOIS	0	0	0	4,497	43	4,540	4,540
INDIANA	0	0	0	2,122	0	2,122	2,122
IOWA	0	0	0	1,016	65	1,081	1,081
KANSAS	0	0	0	1,070	0	1,070	1,070
KENTUCKY	0	0	0	732	95	827	827
LOUISIANA	30	0	30	2,738	0	2,738	2,768
MAINE	0	24	24	279	34	313	337
MARYLAND	0	12	12	1,362	45	1,407	1,419
MASSACHUSETTS	0	296	296	3,026	136	3,162	3,458
MICHIGAN	0	0	0	1,237	0	1,237	1,237
MINNESOTA	28	0	28	1,410	57	1,467	1,495
MISSISSIPPI	155	27	182	1,483	0	1,483	1,665
MISSOURI	0	14	14	1,885	50e	1,935	1,949
MONTANA	0	0	0	240	10	250	250
NEBRASKA	0	0	0	469	0	469	469
NEVADA	0	0	0	170	0	170	170
NEW HAMPSHIRE	0	0	0	118	0	118	118
NEW JERSEY	0	0	0	5,143	158	5,301	5,301
NEW MEXICO	0	0	0	503	0	503	503
NEW YORK	401	2,996	3,397	8,179	371	8,550	11,947
NORTH CAROLINA	0	0	0	2,715	0	2,715	2,715
NORTH DAKOTA	0	8	8	251	23	274	282
OHIO	0	0	0	2,807	0	2,807	2,807
OKLAHOMA	0	0	0	1,019	0	1,019	1,019
OREGON	0	0	0	863	0	863	863
PENNSYLVANIA	0	0	0	4,082	0	4,082	4,082
RHODE ISLAND	74	108	182	225	43	268	450
SOUTH CAROLINA	0	7	7	2,363	0	2,363	2,370
SOUTH DAKOTA	0	0	0	405	15e	420	420
TENNESSEE	0	0	0	1,963	46	2,009	2,009
TEXAS	205e	416e	621e	7,933e	0	7,933	8,554
UTAH	0	0	0	470	0	470	470
VERMONT	0	0	0	182	0	182	182
VIRGINIA	0	0	0	2,673	47	2,720	2,720
WASHINGTON	0	0	0	1,794	24e	1,818	1,818
WEST VIRGINIA	0	0	0	324	0	324	324
WISCONSIN	0	0	0	1,721	32e	1,753	1,753
WYOMING	0	0	0	411	0	411	411
U.S. Total	1,157	4,512	5,669	87,071	1,528	88,599	94,268

Table 1.7
Net Change in Persons with Mental Retardation and Related Conditions in State-Operated
Residential Facilities on the First and Last Day of Fiscal Year 1989 by State

State	PRF/MR									Total Large (16+)		
	1-15 residents			16+ residents			PRF/Other			PRF/MR and PRF/Other		
	Begin	End	Percent	Begin	End	Percent	Begin	End	Percent	Begin	End	Percent
ALABAMA	0	0	-	1,303	1,295	-0.6%	0	0	-	1,303	1,295	-0.6%
ALASKA	0	0	-	57	57	0.0%	2e	1	-50.0%	59	58	-1.7%
ARIZONA	125e	176e	40.8%	364	340	-6.6%	15	10	-33.3%	379	350	-7.7%
ARKANSAS	0	0	-	1,314	1,302	-0.9%	0	0	-	1,314	1,302	-0.9%
CALIFORNIA	0	0	-	6,825	6,796	-0.4%	0	0	-	6,825	6,796	-0.4%
COLORADO	271	276	1.8%	531	493	-7.2%	0	0	-	531	493	-7.2%
CONNECTICUT	394	416	5.6%	2,137	1,845	-13.7%	34	33	-2.9%	2,171	1,878	-13.5%
DELAWARE	0	0	-	374	356	-4.8%	0	0	-	374	356	-4.8%
D.C.	0	0	-	256	235e	-8.2%	0	0	-	256	235	-8.2%
FLORIDA	0	0	-	1,999	1,999	0.0%	186e	180e	-3.2%	2,185	2,179	-0.3%
GEORGIA	0	0	-	2,080	2,079	-0.0%	10	10	0.0%	2,090	2,089	-0.0%
HAWAII	0	0	-	210	173	-17.6%	0	0	-	210	173	-17.6%
IDAHO	0	0	-	236	221	-6.4%	0	0	-	236	221	-6.4%
ILLINOIS	0	0	-	4,482	4,497	0.3%	31	43	38.7%	4,513	4,540	0.6%
INDIANA	0	0	-	2,212	2,122	-4.1%	0	0	-	2,212	2,122	-4.1%
IOWA	0	0	-	1,070	1,016	-5.0%	51	65	27.5%	1,121	1,081	-3.6%
KANSAS	0	0	-	1,118	1,070	-4.3%	0	0	-	1,118	1,070	-4.3%
KENTUCKY	0	0	-	757	732	-3.3%	98	95	-3.1%	855	827	-3.3%
LOUISIANA	30	30	-	2,801	2,738	-2.2%	0	0	-	2,801	2,738	-2.2%
MAINE	26	24	-7.7%	280	279	-0.4%	33	34	3.0%	313	313	0.0%
MARYLAND	11	12	9.1%	1,415	1,362	-3.7%	106e	45	-57.5%	1,521	1,407	-7.5%
MASSACHUSETTS	205	296	44.4%	3,219	3,026	-6.0%	136e	136	0.0%	3,355	3,162	-5.8%
MICHIGAN	0	0	-	1,438	1,237	-14.0%	0	0	-	1,438	1,237	-14.0%
MINNESOTA	28	28	0.0%	1,471	1,410	-4.1%	75	57	-24.0%	1,546	1,467	-5.1%
MISSISSIPPI	187	182	-2.7%	1,496	1,483	-0.9%	0	0	-	1,496	1,483	-0.9%
MISSOURI	15	14	-6.7%	1,889	1,885	-0.2%	56	50e	-10.7%	1,945	1,935	-0.5%
MONTANA	0	0	-	242	240	-0.8%	8	10	25.0%	250	250	0.0%
NEBRASKA	0	0	-	474	469	-1.1%	0	0	-	474	469	-1.1%
NEVADA	0	0	-	173	170	-1.7%	0	0	-	173	170	-1.7%
NEW HAMPSHIRE	0	0	-	144	118	-18.1%	0	0	-	144	118	-18.1%
NEW JERSEY	0	0	-	5,190	5,143	-0.9%	128	158	23.4%	5,318	5,301	-0.3%
NEW MEXICO	0	0	-	507	503	-0.8%	0	0	-	507	503	-0.8%
NEW YORK	3,757	3,397	-9.6%	9,507	8,179	-14.0%	57e	371	-35.1%	10,079	8,550	-15.2%
NORTH CAROLINA	0	0	-	2,845	2,715	-4.6%	0	0	-	2,845	2,715	-4.6%
NORTH DAKOTA	11	8	-27.3%	316	251	-20.6%	20	23	15.0%	336	274	-18.5%
OHIO	0	0	-	2,885	2,807	-2.7%	0	0	-	2,885	2,807	-2.7%
OKLAHOMA	0	0	-	1,186	1,019	-14.1%	0	0	-	1,186	1,019	-14.1%
OREGON	0	0	-	1,097	863	-21.3%	0	0	-	1,097	863	-21.3%
PENNSYLVANIA	0	0	-	4,606	4,082	-11.4%	0	0	-	4,606	4,082	-11.4%
RHODE ISLAND	174	182	4.6%	261	225	-13.8%	43e	43	0.0%	304	268	-11.8%
SOUTH CAROLINA	9	7	-22.2%	2,437	2,363	-3.0%	0	0	-	2,437	2,363	-3.0%
SOUTH DAKOTA	0	0	-	434	405	-6.7%	15e	15e	0.0%	449	420	-6.5%
TENNESSEE	0	0	-	2,017	1,963	-2.7%	59	46	-22.0%	2,076	2,009	-3.2%
TEXAS	621e	621e	0.0%	7,933e	7,933e	0.0%	0	0	-	7,933	7,933	0.0%
UTAH	0	0	-	537	470	-12.5%	0	0	-	537	470	-12.5%
VERMONT	0	0	-		182	-2.2%	0	0	-	186	182	-2.2%
VIRGINIA	0	0	-	27	2,673	-3.6%	72	47	-34.7%	2,846	2,720	-4.4%
WASHINGTON	0	0	-	1,801	1,794	-0.4%	24	24e	0.0%	1,825	1,818	-0.4%
WEST VIRGINIA	0	0	-	456e	324	-28.9%	0	0	-	456	324	-28.9%
WISCONSIN	0	0	-	1,836	1,721	-6.3%	32e	32e	0.0%	1,868	1,753	-6.2%
WYOMING	0	0	-	419	411	-1.9%	0	0	-	419	411	-1.9%
U.S. Total	5,864	5,669	-3.3%	91,597	87,071	-4.9%	1,806	1,528	-15.4%	93,403	88,599	-5.1%

***First Admissions of Persons With Mental Retardation
and Related Conditions to State-Operated Residential Facilities***

Table 1.8 reports first admissions to state-operated residential facilities in Fiscal Year 1989. In this survey first admissions were defined as persons who had never previously resided in any state-operated residential facility. However, in a few states this specific statistic was not available, and persons reported as "first admissions" were persons who were new to a particular facility to which they had been admitted. Some of these individuals may have previously resided in another state facility, resulting in slight inflation of those states' "first admission" totals. For FY 1989 five states were unable to furnish first admission data on large PRF/MR; eight were unable to provide those data for PRF/Other; seven (including New York and Texas) were unable to provide those data for small PRF/MR.

In Fiscal Year 1989 reporting states indicated a total of 2,516 first admissions to large PRF/MR. Estimations of first admissions to PRF/MR in the five nonreported states, based on the ratio of first admissions to average daily population in states reporting first admissions, produced a national estimate of 2,807 first admissions in FY 1989, or 3.2% of the June 30, 1989 population of those facilities. Reporting states indicated 439 first admissions to PRF/Other. Again, estimates for states unable to report first admissions to PRF/Other were produced based on the average first admission rate of reporting states. This yielded a national estimate of 563 first admissions to PRF/Other. Therefore, there were an estimated 3,370 first admissions to large state institutions in FY 1989, or 3.7% of the average daily population during Fiscal Year 1989. About 17% of estimated first admissions were to PRF/Other. This is notable considering that only about 2% of the total average daily residents lived in PRF/Other. The large proportion of first admissions to PRF/Other is counterbalanced by similarly high total releases from such facilities (see Table 1.10). Obviously PRF/Other tend to provide relatively short-term placements for persons with mental retardation, presumably related in most cases to behavioral treatment, crisis intervention, and/or evaluation and assessment. Arizona, District of Columbia, Hawaii, New Hampshire, and Vermont reported no first admissions to large PRF/MR in Fiscal Year 1989, and Idaho, Montana, Nebraska, North Carolina, Oklahoma, and Rhode Island each reported first admission rates of only 1%.

Table 1.8
First Admissions of Persons with Mental Retardation and Related Conditions
to State-Operated Residential Facilities During Fiscal Year 1989 by State

State	Small PRF/MR			Large PRF		
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other Large Total	
ALABAMA	0	0	0	38	0	38
ALASKA	0	0	0	1	DNF	1
ARIZONA	DNF	DNF	DNF	0	DNF	0
ARKANSAS	0	0	0	29	0	29
CALIFORNIA	0	0	0	604	0	604
COLORADO	DNF	DNF	DNF	36	0	36
CONNECTICUT	DNF	DNF	DNF	DNF	6	6
DELAWARE	0	0	0	DNF	0	0
D.C.	0	0	0	0	0	0
FLORIDA	0	0	0	72c	29c	101
GEORGIA	0	0	0	126	171	297
HAWAII	0	0	0	0	0	0
IDAHO	0	0	0	3c	0	3
ILLINOIS	0	0	0	86	22	108
INDIANA	0	0	0	53c	0	53
IOWA	0	0	0	27	63	90
KANSAS	0	0	0	33c	0	33
KENTUCKY	0	0	0	17	31	48
LOUISIANA	DNF	0	DNF	87	0	87
MAINE	0	8	8	50	DNF	50
MARYLAND	0	10	10	57	DNF	57
MASSACHUSETTS	0	65c	65c	64	DNF	4
MICHIGAN	0	0	0	DNF	0	0
MINNESOTA	DNF	0	DNF	99	0	99
MISSISSIPPI	30	0	30	53	0	53
MISSOURI	0	0	0	42	DNF	42
MONTANA	0	0	0	2	4	6
NEBRASKA	0	0	0	7	0	7
NEVADA	0	0	0	13	0	13
NEW HAMPSHIRE	0	0	0	0	0	0
NEW JERSEY	0	0	0	DNF	37	37
NEW MEXICO	0	0	0	11	0	11
NEW YORK	DNF	DNF	DNF	296	33	329
NORTH CAROLINA	0	0	0	24	0	24
NORTH DAKOTA	0	2	2	5	9	14
OHIO	0	0	0	79	0	79
OKLAHOMA	0	0	0	14	0	14
OREGON	0	0	0	5	0	5
PENNSYLVANIA	0	0	0	78	0	78
RHODE ISLAND	1	1	2	3	0	3
SOUTH CAROLINA	0	1	1	60	0	60
SOUTH DAKOTA	0	0	0	7	DNF	7
TENNESSEE	0	0	0	34	31	65
TEXAS	DNF	DNF	DNF	161c	0	161
UTAH	0	0	0	10	0	10
VERMONT	0	0	0	0	0	0
VIRGINIA	0	0	0	56	3	59
WASHINGTON	0	0	0	38	0	38
WEST VIRGINIA	0	0	0	DNF	0	0
WISCONSIN	0	0	0	29	DNF	29
WYOMING	0	0	0	7	0	7
Reported U.S. Total	31	87	118	2,516	439	2,955
U.S. Total				2,807	563	3,370

*Readmissions of Persons With Mental Retardation
and Related Conditions to State-Operated Residential Facilities*

Table 1.9 summarizes statistics on readmissions to state-operated residential facilities in Fiscal Year 1989. In this survey readmissions were defined as persons who had at least once before been a resident of a state-operated residential facility. However, in a few states this specific statistic was not available, and persons reported as "readmissions" included only people who had previously resided in the specific facility to which they were once again admitted during the year. In those states the number of "readmissions" may be somewhat deflated. Statistics on readmissions were not available on large PRF/MR in eight states, on small PRF/MR in eight states (including New York and Texas), and on PRF/Other in seven states. In a few instances this was because first admissions and readmissions are not distinguished in the state data systems.

In Fiscal Year 1989 forty-three states reported 1,947 readmissions to large PRF/MR and 44 states reported 486 readmissions of persons with mental retardation to PRF/Other (including 32 states reporting "0" readmissions). Using the average readmission rate of reporting states, the estimated readmissions to PRF/MR in FY 1989 would be 2,530, or 2.9% of the June 30, 1989 population of those facilities, and the national total of readmissions to PRF/Other would be 618. Therefore, there was an estimated total of 3,148 readmissions to large PRF/MR and PRF/Other in FY 1989 representing 3.5% of the average daily population during Fiscal Year 1989. About 20% of estimated readmissions in FY 1989 were to PRF/Other, even though PRF/Other housed only about 2% of the average daily population. As noted in the discussion of first admissions, these facilities show high activity in all resident movement categories, indicating short-term residential placements, including behavioral treatment, crisis intervention, and/or evaluation functions.

In 1989 Alaska, the District of Columbia, and New Hampshire reported no readmissions to large PRF/MR. Fourteen states reported 10 or fewer. The highest reported total was 601 in New York, 24% of the national estimated total, and about 7% of New York's average daily population in large PRF/MR. Other states with reported readmissions of 7% or more of average daily population include Hawaii (7.8%), Maine (35.7%), Maryland (13.1%), and Nevada (15.6%).

Table 1.9
Readmissions of Persons with Mental Retardation and Related Conditions
to State-Operated Residential Facilities During Fiscal Year 1989 by State

State	Small PRF/MR			Large PRF		
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other	Large Total
ALABAMA	0	0	0	14	0	14
ALASKA	0	0	0	0	DNF	0
ARIZONA	DNF	DNF	DNF	1	0	1
ARKANSAS	0	0	0	8	0	8
CALIFORNIA	0	0	0	67	0	67
COLORADO	DNF	DNF	DNF	10	0	10
CONNECTICUT	DNF	DNF	DNF	DNF	10	10
DELAWARE	0	0	0	DNF	0	0
D.C.	0	0	0	0	0	0
FLORIDA	0	0	0	45c	16c	61
GEORGIA	0	0	0	23	34	57
HAWAII	0	0	0	15	0	15
IDAHO	0	0	0	1	0	1
ILLINOIS	0	0	0	148	33	181
INDIANA	0	0	0	74c	0	74
IOWA	0	0	0	46	110	156
KANSAS	0	0	0	55c	0	55
KENTUCKY	0	0	0	22	1	23
LOUISIANA	DNF	0	DNF	50	0	50
MAINE	0	0	0	101	DNF	101
MARYLAND	0	4	4	182	DNF	182
MASSACHUSETTS	0	4c	4c	44	DNF	44
MICHIGAN	0	0	0	DNF	0	0
MINNESOTA	DNF	0	DNF	DNF	0	0
MISSISSIPPI	14	0	14	26	0	26
MISSOURI	0	DNF	DNF	DNF	DNF	0
MONTANA	0	0	0	3	5	8
NEBRASKA	0	0	0	1	0	1
NEVADA	0	0	0	27	0	27
NEW HAMPSHIRE	0	0	0	0	0	0
NEW JERSEY	0	0	0	DNF	58	58
NEW MEXICO	0	0	0	8	0	8
NEW YORK	DNF	DNF	DNF	601	120	721
NORTH CAROLINA	0	0	0	74	0	74
NORTH DAKOTA	0	0	0	1	22	23
OHIO	0	0	0	11	0	11
OKLAHOMA	0	0	0	1	0	1
OREGON	0	0	0	12	0	12
PENNSYLVANIA	0	0	0	49	0	49
RHODE ISLAND	8	15	23	7	0	7
SOUTH CAROLINA	0	1	1	33	0	33
SOUTH DAKOTA	0	0	0	11	DNF	11
TENNESSEE	0	0	0	44	38	82
TEXAS	DNF	DNF	DNF	DNF	0	0
UTAH	0	0	0	8	0	8
VERMONT	0	0	0	1	0	1
VIRGINIA	0	0	0	80	39	119
WASHINGTON	0	0	0	8	0	8
WEST VIRGINIA	0	0	0	DNF	0	0
WISCONSIN	0	0	0	33	DNF	33
WYOMING	0	0	0	2	0	2
Reported U.S. Total	22	24	46	1,947	486	2,433
Estimated Total				2,530	618	3,148

***Releases of Persons With Mental Retardation
and Related Conditions From State-Operated Residential Facilities***

Table 1.10 summarizes statistics reported by the states on residents released from state-operated residential facilities in Fiscal Year 1989. For the purposes of this study releases were defined as persons with mental retardation and related conditions who were officially released from state-operated facilities and removed from the rolls during the year. Six states were unable to provide the number of releases from large PRF/MR, seven states were unable to report releases of persons with mental retardation from PRF/Other, and six states were unable to report releases from small PRF/MR.

States reported a total of 5,470 releases from large PRF/MR and 1,067 from PRF/Other for FY 1989. Estimations of releases from PRF/MR in the six nonreporting states based on the release rate of all reporting states produced a total national estimate of 6,122 releases from large PRF/MR in 1989. Similar estimates of PRF/Other releases in nonreporting states yielded a total national estimate of 1,357 releases from PRF/Other in FY 1989. Thus, an estimated 7,479 persons were released from large state facilities for an annual rate of 8.3% of the average daily population during Fiscal Year 1989. The release rates (ratio of releases to average daily population) for large state facilities in 1989 (1:12.1) was nearly the same as the 1988 rate (1:12.2). Release rates for PRF/MR (1:14.5) were much smaller than those of PRF/Other (1:1.2). PRF/Other reported 18% of all releases from large state facilities even though PRF/Other residents made up only 2% of the population of all state-operated facilities.

In Fiscal Year 1989 states varied substantially in the total number and rates of released residents from their large state-operated facilities. Of states reporting releases from large facilities Arizona, Vermont and Washington reported fewer than 10 releases, while California, New York, and Pennsylvania all reported over 500. New York reported by far the greatest number of releases from large state-operated residential facilities in 1989 with its total of 903 representing about 12% of all releases nationally. However, relative to each state's average daily population, Hawaii, Iowa, Maryland, Nevada, North Dakota, and Oregon were most active in releasing residents of large state facilities with at least 1 release during the year for every 4 persons in the average daily population.

Table 1.10
Releases of Persons with Mental Retardation and Related Conditions
from State-Operated Residential Facilities During Fiscal Year 1989 by State

State	Small PRF/MR			Large PRF		
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other	Large Total
ALABAMA	0	0	0	78	0	78
ALASKA	0	0	0	1	DNF	1
ARIZONA	DNF	DNF	DNF	0	5	5
ARKANSAS	0	0	0	33	0	33
CALIFORNIA	0	0	0	535	0	535
COLORADO	DNF	DNF	DNF	65	0	65
CONNECTICUT	DNF	DNF	DNF	DNF	19	19
DELAWARE	0	0	0	DNF	0	0
D.C.	0	0	0	DNF	0	0
FLORIDA	0	0	0	112e	25e	137
GEORGIA	0	0	0	138	205	343
HAWAII	0	0	0	48	0	48
IDAHO	0	0	0	16	0	16
ILLINOIS	0	0	0	172	39	211
INDIANA	0	0	0	214	0	214
IOWA	0	0	0	127	158	285
KANSAS	0	0	0	132	0	132
KENTUCKY	0	0	0	53	32	85
LOUISIANA	DNF	0	DNF	159	0	159
MAINE	0	0	0	129	DNF	129
MARYLAND	0	18	18	341	DNF	341
MASSACHUSETTS	0	0	0	57	DNF	57
MICHIGAN	0	0	0	DNF	0	0
MINNESOTA	DNF	0	DNF	129	18	147
MISSISSIPPI	21	3	24	78	0	78
MISSOURI	0	0	0	58	DNF	58
MONTANA	0	0	0	8	7	15
NEBRASKA	0	0	0	8	0	8
NEVADA	0	0	0	43	0	43
NEW HAMPSHIRE	0	0	0	25	0	25
NEW JERSEY	0	0	0	DNF	70	70
NEW MEXICO	0	0	0	16	0	16
NEW YORK	115	468	583	561	342	903
NORTH CAROLINA	0	0	0	37	0	37
NORTH DAKOTA	0	5	5	61	28	89
OHIO	0	0	0	206	0	206
OKLAHOMA	0	0	0	60	0	60
OREGON	0	0	0	240	0	240
PENNSYLVANIA	0	0	0	587	0	587
RHODE ISLAND	2	6	8	33	0	33
SOUTH CAROLINA	0	4	4	158	0	158
SOUTH DAKOTA	0	0	0	44	DNF	44
TENNESSEE	0	0	0	116	72	188
TEXAS	DNF	DNF	DNF	169e	0	169
UTAH	0	0	0	80	0	80
VERMONT	0	0	0	3	0	3
VIRGINIA	0	0	0	163	47e	210
WASHINGTON	0	0	0	3	0	3
WEST VIRGINIA	0	0	0	DNF	0	0
WISCONSIN	0	0	0	163	DNF	163
WYOMING	0	0	0	11	0	11
Reported U.S. Total	138	504	642	5,470	1,067	6,537
Estimated U.S. Total				6,122	1,357	7,479

***Deaths of Persons With Mental Retardation
and Related Conditions in State-Operated Residential Facilities***

Table 1.11 summarizes statistics reported by the states on the number of persons with mental retardation and related conditions who died while on the rolls of state-operated residential facilities in Fiscal Year 1989. Caution must be exercised in comparing or interpreting death rates across states. Residents with life threatening conditions are sometimes transferred to medical hospitals or skilled nursing homes, particularly when acute medical services are not available in a state-operated facility. State facility residents who die in a hospital or skilled nursing facility may or may not still be considered to be on the rolls of the state-operated facility when they die. Caution is also required in making interstate comparisons of deaths among state facility populations because states vary not only in the administrative status of persons transferred to medical facilities, but also in the age and disability profiles of the populations they serve in their state-operated facilities (see Part 2 of this report).

In Fiscal Year 1989, 1,080 deaths were reported in large PRF/MR by the 46 states providing this statistic. A total of 19 deaths was reported by 43 states in their PRF/Other. National statistics on deaths in small PRF/MR are not considered reliable in the absence of data from many of the states that operate such facilities in the U.S.

Estimating deaths in the five states unable to provide the statistics for large PRF/MR, based on the ratio of deaths to average daily residents in reporting states, yielded an estimated 1,180 deaths nationwide. Using the same method of estimation for states unable to report deaths of persons with mental retardation in PRF/Other, an estimate of 25 deaths nationally in PRF/Other was obtained. The estimated total of 1,205 deaths in large PRF/MR and PRF/Other and the national average of 1.3 deaths per 100 average daily residents of large state facilities was slightly lower than in Fiscal Year 1988 survey in which there were 1,373 deaths and 1.5 deaths per 100 of the average daily residents of large state facilities. Nationwide, PRF/MR averaged 1.3 deaths per 100 average daily residents in Fiscal Year 1989, while PRF/Other average 1.6 deaths per 100 average daily residents.

Table 1.11
Deaths of Persons with Mental Retardation and Related Conditions
in State-Operated Residential Facilities During Fiscal Year 1989 by State

State	Small PRF/MR			Large PRF	
	1-6 res.	7-15 res.	1-15 Total	PRF/MR 16+ res.	PRF/Other Large Total
ALABAMA	0	0	0	5	0
ALASKA	0	0	0	0	DNF
ARIZONA	DNF	DNF	DNF	1	DNF
ARKANSAS	0	0	0	8	0
CALIFORNIA	0	0	0	158	0
COLORADO	DNF	DNF	DNF	15	0
CONNECTICUT	3	1	4	17	1
DELAWARE	0	0	0	DNF	0
D.C.	0	0	0	DNF	0
FLORIDA	0	0	0	17e	1
GEORGIA	0	0	0	12	0
HAWAII	0	0	0	2	0
IDAHO	0	0	0	3e	0
ILLINOIS	0	0	0	53	0
INDIANA	0	0	0	12	0
IOWA	0	0	0	13	DNF
KANSAS	0	0	0	4	0
KENTUCKY	0	0	0	11	3
LOUISIANA	DNF	0	DNF	41	0
MAINE	0	0	0	11	1
MARYLAND	0	0	0	28	DNF
MASSACHUSETTS	0	1	1	44	DNF
MICHIGAN	0	0	0	DNF	0
MINNESOTA	DNF	0	DNF	14	0
MISSISSIPPI	1	0	1	20	0
MISSOURI	0	0	0	30	DNF
MONTANA	0	0	0	2	0
NEBRASKA	0	0	0	5	0
NEVADA	0	0	0	0	0
NEW HAMPSHIRE	0	0	0	1	0
NEW JERSEY	0	0	0	DNF	0
NEW MEXICO	0	0	0	9	0
NEW YORK	3	31	34	139	9
NORTH CAROLINA	0	0	0	14	0
NORTH DAKOTA	0	0	0	10	0
OHIO	0	0	0	22	0
OKLAHOMA	0	0	0	7	0
OREGON	0	0	0	11	0
PENNSYLVANIA	0	0	0	64	0
RHODE ISLAND	0	2	2	0	0
SOUTH CAROLINA	0	0	0	50	0
SOUTH DAKOTA	0	0	0	3	DNF
TENNESSEE	0	0	0	29	3
TEXAS	DNF	DNF	DNF	101e	0
UTAH	0	0	0	6	0
VERMONT	0	0	0	2	0
VIRGINIA	0	0	0	48	1e
WASHINGTON	0	0	0	18	0
WEST VIRGINIA	0	0	0	DNF	0
WISCONSIN	0	0	0	14	DNF
WYOMING	0	0	0	6	0
Reported U.S. Total	7	35	42	1,080	19
Estimated U.S. Total				1,180	25

Cost of Care in State-Operated Residential Facilities

Table 1.12 summarizes the costs of care for persons with mental retardation and related conditions residing in state-operated residential facilities. These costs are reported on an average per resident per day basis. The national averages presented are the average daily per resident costs reported by each state weighted by that state's average daily residential population. For Fiscal Year 1989 every state reported the average daily cost for large PRF/MR; all but three states reported that cost for PRF/Other. Three states were not able to provide a per resident per day cost statistic for their small PRF/MR.

Average cost of care in large PRF/MR varied considerably across the United States with a national average of \$184.11 per day. The highest cost of care in large PRF/MR reported for Fiscal Year 1989 was \$353.24 per day in Connecticut, followed in order by Rhode Island (\$345.70), Massachusetts (\$324.88), Alaska (\$321.31) and New York (\$317.12). In all, 41% of the states (21) reported annual per resident costs in PRF/MR above the national average (\$184.00 per day or \$67,200 per year). Only two states reported per resident per day average costs below \$100 in their PRF/MR, Mississippi (\$75.00) and Louisiana (\$92.72). From Fiscal Year 1988 to 1989 the per resident per day average cost of care in large PRF/MR increased 17.4% from \$156.77, the largest annual increase since 1981. However, this increase followed an abnormally small increase between Fiscal Year 1987 and 1988 (5.0%), with the average annual increase over that two-year period (11.2%) being almost exactly the average annual increase since 1977 (11.1%).

The 23 states providing for persons with mental retardation in PRF/Other and reporting the costs of care in those facilities reported an average per resident cost of \$162.12, with a much smaller reported increase from 1988 to 1989 (4%) than was reported for large PRF/MR. However, the reported PRF/Other costs are usually the per resident costs of the entire facility, not specifically the costs for residents with mental retardation, and since total PRF/Other populations have stabilized nationwide, per resident costs are not being driven up by the spreading of fixed institutional cost over fewer and fewer residents as is occurring in PRF/MR. Costs of care reported by 12 states for small PRF/MR (representing 89% of the population of small facilities) averaged \$165.43 per resident per day or about 90% of those reported for large PRF/MR residential programs.

Table 1.12
Average Per Resident Daily Cost of Care in
State-Operated Residential Facilities During Fiscal Year 1989

State	PRF/MR				PRF/Other
	1-6 res.	7-15 res.	1-15 Total	16+ res.	
ALABAMA	N/A	N/A	N/A	\$143.19	N/A
ALASKA	N/A	N/A	N/A	\$321.31	\$336.39
ARIZONA	\$111.00	\$209.00	\$142.78	\$209.00	\$203.00
ARKANSAS	N/A	N/A	N/A	\$119.00	N/A
CALIFORNIA	N/A	N/A	N/A	\$213.31	N/A
COLORADO	N/A	\$141.00	\$141.00	\$141.00	N/A
CONNECTICUT	\$365.36	\$334.89	\$336.72	\$353.24	\$356.00
DELAWARE	N/A	N/A	N/A	\$160.00e	N/A
D.C.	N/A	N/A	N/A	\$245.00	N/A
FLORIDA	N/A	N/A	N/A	\$142.00e	\$159.40
GEORGIA	N/A	N/A	N/A	\$201.00	\$202.00
HAWAII	N/A	N/A	N/A	\$198.63	N/A
IDAHO	N/A	N/A	N/A	\$220.00	N/A
ILLINOIS	N/A	N/A	N/A	\$144.67	\$172.77
INDIANA	N/A	N/A	N/A	\$137.70	N/A
IOWA	N/A	N/A	N/A	\$149.34	DNF
KANSAS	N/A	N/A	N/A	\$148.35	N/A
KENTUCKY	N/A	N/A	N/A	\$141.66	\$144.18
LOUISIANA	\$71.91	N/A	\$71.91	\$92.72	N/A
MAINE	N/A	\$163.00	\$163.00	\$209.24	\$167.21
MARYLAND	N/A	DNF	DNF	\$166.00	DNF
MASSACHUSETTS	N/A	\$231.00	\$231.00	\$324.88	DNF
MICHIGAN	N/A	N/A	N/A	\$237.63	N/A
MINNESOTA	\$147.00e	N/A	\$147.00e	\$191.00	\$122.19
MISSISSIPPI	DNF	DNF	\$30.00	\$75.00e	N/A
MISSOURI	N/A	\$85.00e	\$85.00e	\$130.00e	\$130.00
MONTANA	N/A	N/A	N/A	\$163.55	\$126.99
NEBRASKA	N/A	N/A	N/A	\$111.12	N/A
NEVADA	N/A	N/A	N/A	\$189.87	N/A
NEW HAMPSHIRE	N/A	N/A	N/A	\$249.00	N/A
NEW JERSEY	N/A	N/A	N/A	\$197.00	\$222.48
NEW MEXICO	N/A	N/A	N/A	\$122.89	N/A
NEW YORK	\$182.04	\$182.04	\$182.04	\$317.12	\$231.64
NORTH CAROLINA	N/A	N/A	N/A	\$159.92	N/A
NORTH DAKOTA	N/A	DNF	DNF	\$235.83	\$194.26
OHIO	N/A	N/A	N/A	\$207.17	N/A
OKLAHOMA	N/A	N/A	N/A	\$175.00	N/A
OREGON	N/A	N/A	N/A	\$235.10	N/A
PENNSYLVANIA	N/A	N/A	N/A	\$176.14	N/A
RHODE ISLAND	\$169.49	\$130.00	\$145.97	\$345.70	\$199.45
SOUTH CAROLINA	N/A	\$110.66	\$110.66	\$110.42	N/A
SOUTH DAKOTA	N/A	N/A	N/A	\$117.72	\$98.74
TENNESSEE	N/A	N/A	N/A	\$127.70	\$162.43
TEXAS	DNF	DNF	DNF	\$103.48	N/A
UTAH	N/A	N/A	N/A	\$136.00	N/A
VERMONT	N/A	N/A	N/A	\$212.61	N/A
VIRGINIA	N/A	N/A	N/A	\$144.49	\$157.71
WASHINGTON	N/A	N/A	N/A	\$167.60	\$161.00
WEST VIRGINIA	N/A	N/A	N/A	\$145.20	N/A
WISCONSIN	N/A	N/A	N/A	\$159.00e	\$200.00
WYOMING	N/A	N/A	N/A	\$111.60	N/A
U.S. Total			\$165.43	\$184.11	\$162.12

PART 2: CHARACTERISTICS AND MOVEMENT OF PERSONS WITH MENTAL RETARDATION IN LARGE STATE-OPERATED RESIDENTIAL FACILITIES IN 1989

Methodology

Part 2 of this report describes the results of a facility survey of all large (16 or more residents) PRF/MR (state-operated facilities for persons with mental retardation and related conditions) identified by the states as operating on June 30, 1989. This survey included questions on demographic, diagnostic, and functional characteristics of each facility's residents and on patterns of resident movement, including previous place of residence of new admissions and readmissions to each state-operated residential facility. Although the survey did not include the 894 small state-operated facilities, nor the 123 PRF/Other identified in Part 1, it does present considerably more detail on the residents of the large PRF/MR than could be obtained directly from state offices.

The facilities included in this study were the 254 large state-operated residential facilities represented in the National Association of Superintendents of Public Residential Facilities for the Mentally Retarded (NASPRFMR) (Scheerenberger, 1990) which were directly surveyed under the auspices of NASPRFMR by Richard Scheerenberger (1990) through a subcontract with the Center for Residential and Community Services (CRCS) and 34 additional large state-operated facilities which were directly surveyed by CRCS. Data collection was carried out primarily by mail with telephone follow-up to nonrespondents. Three instruments were used in this survey. They included a long form (22 items) initially mailed to all facilities (returned by 240 facilities, 83.3%), a short form (10 items) mailed to all nonrespondents to the long form (returned by 19 facilities, 6.6%), and a minimum data set of 5 questions on current resident population gathered in a final telephone follow-up (29 facilities, 10.1%). Responses were obtained from 100% of PRF/MR with 16 or more residents known to be operating in the United States on June 30, 1989. Item response rates ranged from facilities housing 71.6% of all PRF/MR residents to one item asking the number of persons with mental retardation unable to understand spoken language to 100% on a number of items. In the presentation of data that follows item response rates are expressed as the percentage of residents of all large PRF/MR residing in the facilities reporting the particular item.

Findings

Characteristics of Residents

Table 2.1 presents a summary of age, diagnostic and functional characteristics of residents of large state-operated residential facilities (PRF/MR) on June 30 of 1977, 1982, 1987 and 1989.

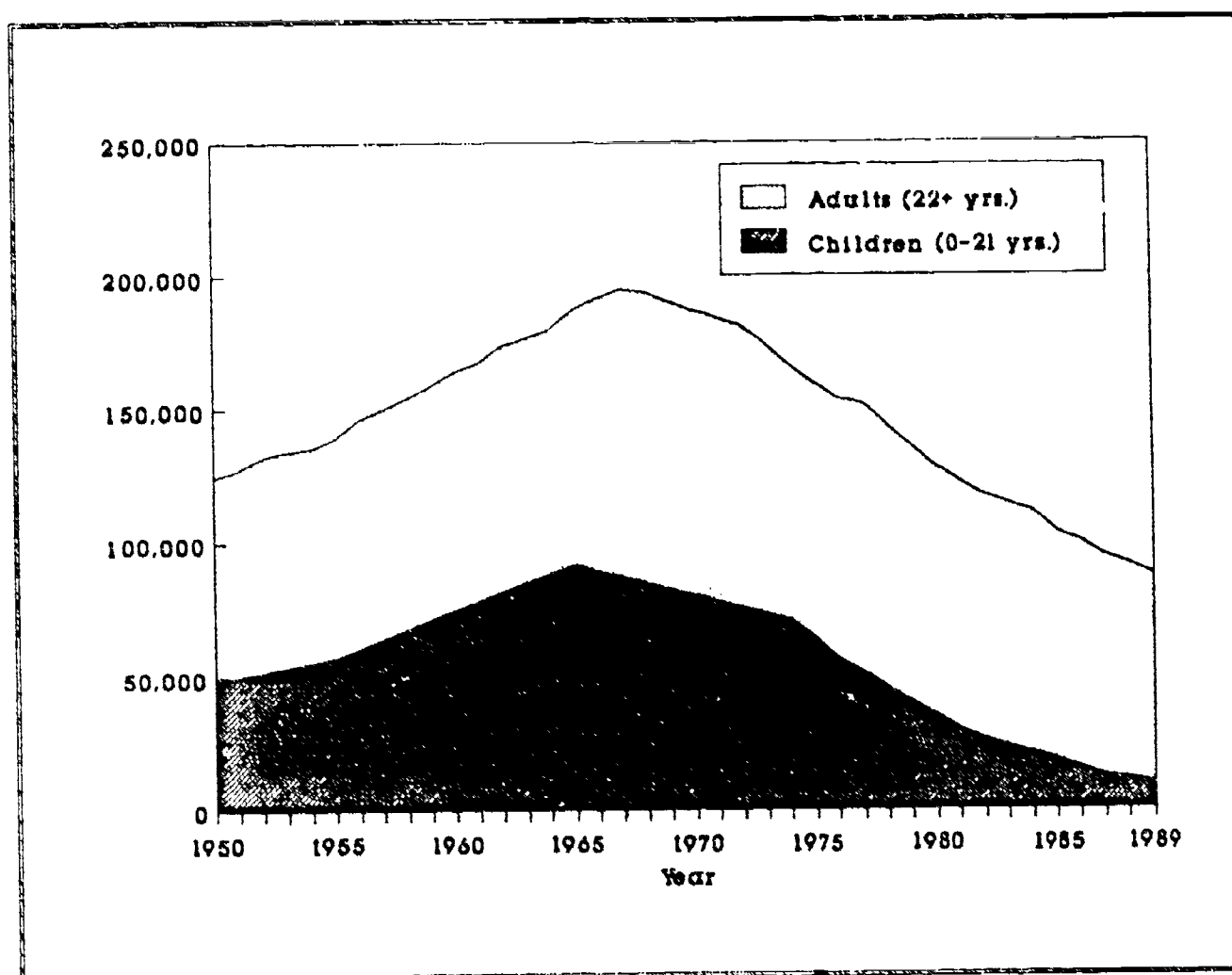
Table 2.1
Characteristics of Residents of Large State-Operated Residential Facilities on June 30: 1977, 1982, 1987, and 1989

Characteristic		June 30 of the Year			
		1977 (N=151,112)	1982 (N=119,335)	1987 (N=94,695)	1989 (N=87,071)
Age	0-21 years	35.8%	22.0%	12.7%	10.6%
	22-39 years	41.3%	50.2%	54.1%	52.4%
	40-62 years	19.2%	22.9%	27.3%	30.3%
	63+ years	3.7%	5.0%	6.0%	6.8%
Level of Retardation	Border/Mild	10.4%	7.1%	7.2%	6.7%
	Moderate	16.4%	12.5%	9.8%	10.1%
	Severe	27.6%	24.2%	20.0%	19.5%
	Profound	45.6%	56.2%	63.0%	63.7%
Functional Limitations	Cannot walk	23.3%	25.5%	29.5%	31.2%
	Cannot talk	43.5%	49.1%	54.8%	55.3%
	Not toilet-trained	34.1%	38.0%	53.4%	54.6%
	Cannot eat independently	21.4%	35.0%	37.8%	38.2%

Age of residents. There has been a continual aging of the population of residents of large PRF/MR since 1977. Age statistics are based on the reports of PRF/MR with 89.3% of the June 30, 1989 resident population. The proportion of children and youth (birth to 21 years) living in PRF/MR declined from 35.8% in 1977 to 10.5% in 1989, while the proportion of 63 years and older increased from 3.7% of all residents in June 1977 to 6.8% of all residents in June 1989. Despite the substantial increase in the proportion of residents 63 years and older in PRF/MR, the total number of residents 63 years and older increased by only 335 residents over the period as the total PRF/MR populations decreased substantially. As shown in Figure 2.1 the June 30, 1989 estimate of 9,230 children and youth (0-21 years) making up 10.6% of the PRF/MR population reflects dramatic decreases during the second half of this century and particularly the past quarter century. In 1950 48,354 of the 124,304 PRF/MR residents (38.9%) were 21 years or younger. By 1965 the population of children and youth had increased by 91,592, or 48.9% of the PRF/MR populations.

Subsequent annual decreases brought the population of children and youth to 54,230 (35.8%) in 1977 and eventually to under 10,000 in 1989.

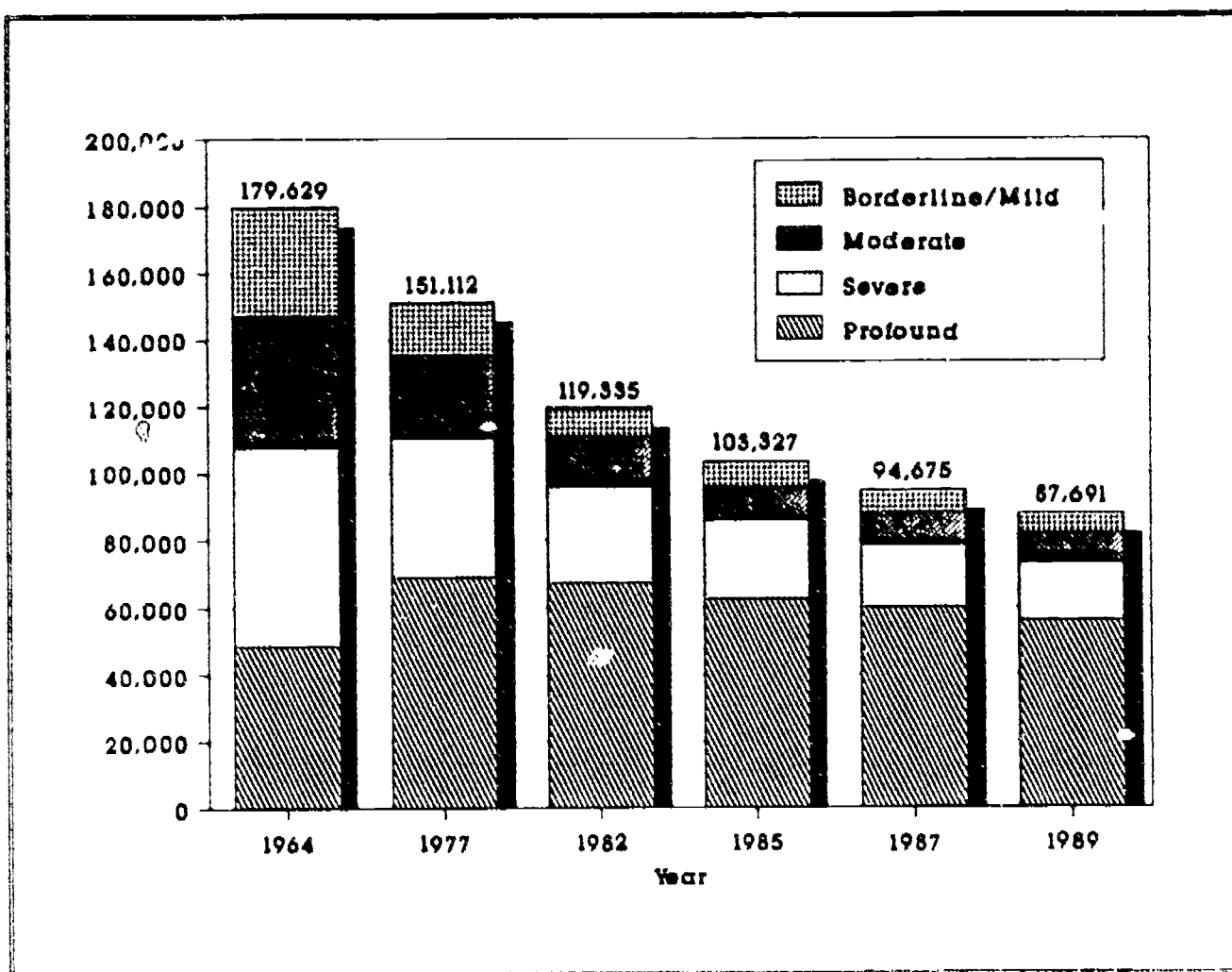
Figure 2.1
Total and Childhood (0-21 Years) Populations of State Mental Retardation Institutions, 1950-1989



Level of mental retardation. Table 2.1 also presents a breakdown of the diagnosed level of mental retardation of residents of PRF/MR on June 30 of 1977, 1982, 1987 and 1989. These statistics show the continuing trend toward reduced numbers and proportions of persons with mild, moderate, and severe mental retardation and increased proportions of persons with profound mental retardation in PRF/MR. In 1989, based on the reports of facilities housing 89.2% of all PRF/MR residents, there were an estimated 5,834 PRF/MR residents with mild or "borderline" mental retardation (6.7% of all residents) as compared with an estimated 15,700 in 1977 (10.4% of all residents). In contrast, the proportion of PRF/MR residents with profound mental retardation increased substantially from 1977 to 1989, from 45.6% of all residents to 63.7%

of all residents. Despite the proportional increases the actual number of persons with profound mental retardation in PRF/MR decreased by over 13,000 people between 1977 and 1989, from about 68,900 to 55,500 people. Figure 2.2 shows some of the same statistics as Table 2.1 with the addition of data from 1964 and 1985 surveys (Scheerenberger, 1965, 1986). It shows that while PRF/MR populations decreased by about 38,500 residents between 1964 and 1977, the number of residents with profound mental retardation actually increased by about 20,000. During the same period the number of PRF/MR residents with mild, moderate, or severe mental retardation decreased nearly 50,000 people from 131,100 to 82,200. In 1989 there were 31,600 large PRF/MR residents with mild, moderate or severe mental retardation, less than a quarter of the number a quarter century earlier.

Figure 2.2
Level of Retardation of Residents of Large State-Operated
Residential Facilities on June 30 of Selected Years, 1964-1989



Functional characteristics. Table 2.1 also shows the percentage of residents of large PRF/MR reported to have important functional limitations. In this study, each of the 288 large PRF/MR was asked to report the number of their residents who: 1) "cannot walk with out assistance," 2) "cannot communicate verbally," 3) "are not toilet trained," and 4) "cannot eat without assistance." These numbers are converted to percentages of all residents in Table 2.1 and shown with comparable statistics form 1977, 1982 and 1987. The 1989 statistics are based on the reports of facilities housing 90.7% of PRF/MR residents. An expected association with the generally more severely intellectually impaired population of PRF/MR in 1989 was the somewhat higher proportion of residents reported to have functional limitations. In 1989, 31% of large PRF/MR residents were reported to be unable to walk without assistance, 55% to be unable to communicate verbally, 55% to be unable to use the toilet independently, and 38% to be unable to feed themselves independently. However, increases between 1987 and 1989 in the proportion of residents with these four functional limitations were small and with all four limitations the actual number of persons in PRF/MR reported to have them decreased between June 1987 and June 1989.

Age by level of mental retardation. Table 2.2 shows the distribution of large PRF/MR residents by age and level of mental retardation groupings. Facilities housing 89.3% of all PRF/MR residents reported this

Table 2.2
Distribution of Residents of Large State-Operated Facilities
on June 30, 1989 by Age and Level of Mental Retardation

Level of Retardation	Chronological Age								Total(%)
	0-4	5-9	10-14	15-21	22-39	40-54	55-62	63+	
Borderline	19	5	9	42	224	94	27	69	489 (0.6%)
Mild	8	9	61	474	2,393	1,163	362	481	4,951 (6.4%)
Moderate	11	30	101	605	3,607	2,120	649	716	7,839 (10.1%)
Severe	24	71	218	951	6,911	3,937	1,310	1,721	15,143 (19.5%)
Profound	133	391	1,058	4,006	27,528	11,303	2,523	2,412	49,354 (63.5%)
Total	195	506	1,447	6,078	40,663	18,617	4,871	5,399	77,776
(%)	(0.3%)	(0.7%)	(1.9%)	(7.8%)	(52.3%)	(23.9%)	(6.3%)	(6.9%)	(100.0%)

Note. Reporting facilities housed 77,776 of 87,071 (89.3%) of large PRF/MR residents on June 30, 1989.

distribution. Within them PRF/MR residents who were older PRF/MR residents had less severe cognitive impairments than the PRF/MR population as a whole (e.g., 44.7% of all PRF/MR residents 63 years or older had profound mental retardation as compared with 63.5% of all residents in the reporting facilities).

Conversely the youngest PRF/MR residents had more severe cognitive impairments than the PRF/MR population as a whole (e.g., 73.5% of PRF/MR residents 14 years and younger had profound mental retardation as compared with 63.5% of the PRF/MR population as a whole).

State-by-State Resident Characteristics

Gender of residents. Table 2.3 shows the distribution of large PRF/MR residents by gender. In all states the majority of large PRF/MR residents were male. Nationally 59.3% of residents were male, with states ranging from a low of 53.3% (Vermont) to a high of 65.5% (Indiana). This represents modest growth in the proportion of male residents in recent years, from 57.0% in 1977, and 57.4% in 1982.

Age distribution of residents by state. Table 2.4 presents the state-by-state age distribution of residents in large PRF/MR on June 30, 1989. The table shows the great variability across states in the ages of PRF/MR residents. Differences were particularly notable in the number of children and youth (0-21 years) and the number of older residents (55 years and older). Nationwide, 10.6% of all large PRF/MR residents were 21 years or younger. However, in 8 states less than 3% of large PRF/MR residents were in the birth to 21 year age range (Alaska, District of Columbia, Massachusetts, Minnesota, New Hampshire, Pennsylvania, Rhode Island, Vermont), while in 5 states more than 20% of PRF/MR populations were made up of persons 21 years and younger (Arkansas, Kansas, Louisiana, Nevada and Oklahoma).

Nationally 13.1% of large PRF/MR residents were 55 years and older. Individual states ranged from about a quarter of all residents being 55 years and older to virtually no residents in this age range. In 8 states over 20% of PRF/MR residents were 55 years or older. These states (Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island, South Carolina) were primarily from the Northeast region of the United States. In seven states less than 4% of PRF/MR residents were 55 years or older (Alaska, Arkansas, Colorado, Kentucky, Nevada, Oklahoma, Utah). It is notable that over half the PRF/MR residents on June 30, 1989 (52.4%) were between the ages of 22 and 39 years. This compares with 30.5% of the general U.S. population. In contrast children and youth birth to 21 years made up 32.0% of the U.S. population, but only 10.6% of the large PRF/MR population, and persons 63 years and older made up 16.8% of the U.S.

Table 2.3
Gender Distribution of Residents of Large State-Operated Residential Facilities by State on June 30, 1989

State	Gender of Residents		Total
	Male	Female	
Alabama	59.4%	40.6%	100.0%
Alaska	61.3	38.7	100.0
Arizona	.	.	.
Arkansas	61.5	38.5	100.0
California	59.9	40.1	100.0
Colorado	60.3	39.7	100.0
Connecticut	57.5	42.5	100.0
Delaware	58.1	41.9	100.0
D.C.	60.4	35.5	100.0
Florida	64.5	35.5	100.0
Georgia	58.3	41.7	100.0
Hawaii	54.6	45.4	100.0
Idaho	.	.	.
Illinois	63.1	36.9	100.0
Indiana	65.5	34.5	100.0
Iowa	63.0	37.0	100.0
Kansas	62.4	37.6	100.0
Kentucky	59.4	40.6	100.0
Louisiana	57.3	42.7	100.0
Maine	62.0	38.0	100.0
Maryland	60.8	39.2	100.0
Massachusetts	58.1	41.9	100.0
Michigan	64.3	35.7	100.0
Minnesota	60.4	39.6	100.0
Mississippi	58.5	41.5	100.0
Missouri	59.6	40.4	100.0
Montana	61.8	38.2	100.0
Nebraska	56.6	43.4	100.0
Nevada	62.1	37.9	100.0
New Hampshire	64.3	35.7	100.0
New Jersey	63.2	36.8	100.0
New Mexico	60.4	39.6	100.0
New York	55.3	44.7	100.0
North Carolina	58.4	41.6	100.0
North Dakota	56.4	43.6	100.0
Ohio	61.6	38.4	100.0
Oklahoma	61.3	38.7	100.0
Oregon	61.5	38.5	100.0
Pennsylvania	56.4	43.6	100.0
Rhode Island	56.0	44.0	100.0
South Carolina	55.0	45.0	100.0
South Dakota	58.3	41.7	100.0
Tennessee	58.9	41.1	100.0
Texas	57.3	42.7	100.0
Utah	56.8	43.2	100.0
Vermont	53.3	46.7	100.0
Virginia	57.2	42.8	100.0
Washington	60.8	39.2	100.0
West Virginia	.	.	.
Wisconsin	61.1	38.9	100.0
Wyoming	.	.	.
U.S. Total	59.3	40.7	100.0

Table 2.4
Age of Residents of Large State-Operated Residential Facilities by State on June 30, 1989

State	Age of Residents in Years								Total
	0-4	5-9	10-14	15-21	22-39	40-54	55-62	63+	
Alabama	0.0%	0.0%	0.9%	7.8%	50.5%	26.2%	7.3%	7.2%	100.0%
Alaska	0.0	0.0	1.6	0.0	91.9	4.8	0.0	1.6	100.0
Arizona	-	-	-	-	-	-	-	-	-
Arkansas	0.0	0.5	3.9	16.2	62.0	16.4	0.7	0.2	100.0
California	1.4	1.6	2.6	9.1	57.1	20.7	4.0	3.6	100.0
Colorado	0.4	1.6	2.0	8.9	67.1	16.3	3.0	0.6	100.0
Connecticut	0.0	0.0	0.2	0.9	39.0	38.7	9.9	11.4	100.0
Delaware	0.0	0.9	1.1	6.5	47.9	24.4	6.5	12.7	100.0
D.C.	0.0	0.0	0.0	1.2	59.0	26.9	6.0	6.8	100.0
Florida	0.0	0.0	0.4	7.1	57.3	23.4	5.9	5.9	100.0
Georgia	0.6	1.0	3.0	10.7	53.9	23.0	3.8	4.0	100.0
Hawaii	0.0	0.6	1.8	10.3	56.4	23.6	3.0	4.2	100.0
Idaho	-	-	-	-	-	-	-	-	-
Illinois	0.0+	0.4	1.0	7.3	54.5	24.8	5.8	6.1	100.0
Indiana	0.0	0.7	1.9	7.6	53.0	30.0	4.4	2.4	100.0
Iowa	0.2	0.3	2.0	7.7	60.3	21.6	4.0	3.9	100.0
Kansas	0.3	3.2	5.4	16.1	54.4	15.6	2.7	2.4	100.0
Kentucky	0.0	0.3	2.7	10.8	66.1	18.6	1.5	0.1	100.0
Louisiana	0.2	1.9	5.2	13.2	49.1	19.4	5.8	5.2	100.0
Maine	0.7	3.6	1.8	10.8	42.7	26.5	7.9	12.8	100.0
Maryland	0.1	0.7	1.8	8.2	58.3	24.2	3.2	3.4	100.0
Massachusetts	0.0	0.0	0.0	1.0	39.8	35.1	11.3	9.3	100.0
Michigan	0.1	0.1	0.7	6.2	56.1	25.6	5.4	5.8	100.0
Minnesota	0.0	0.0	0.0	1.9	62.2	24.8	6.1	5.1	100.0
Mississippi	0.0	1.0	3.9	12.8	53.5	21.8	4.7	2.3	100.0
Missouri	0.5	1.1	2.5	10.1	52.2	21.4	5.9	6.3	100.0
Montana	0.0	0.5	0.5	4.3	56.5	32.3	3.8	2.1	100.0
Nebraska	0.4	1.1	1.3	5.4	52.7	26.6	6.4	6.2	100.0
Nevada	0.0	0.0	4.0	22.4	62.1	10.3	1.2	0.0	100.0
New Hampshire	0.0	0.0	0.0	1.7	43.5	33.0	8.7	13.0	100.0
New Jersey	0.0	0.1	0.6	6.2	47.7	23.5	8.6	13.4	100.0
New Mexico	0.2	2.6	2.0	13.6	60.6	15.9	3.6	1.6	100.0
New York	0.2	0.3	0.7	4.1	42.7	27.9	9.5	14.7	100.0
North Carolina	0.0	0.2	0.5	5.6	57.7	25.6	5.8	4.5	100.0
North Dakota	0.4	1.6	3.6	7.3	47.6	23.8	6.1	9.7	100.0
Ohio	0.0	0.0	0.3	4.5	53.4	29.2	6.1	6.5	100.0
Oklahoma	0.0	0.8	8.0	30.1	58.1	2.8	0.2	0.0	100.0
Oregon	0.0	0.2	0.7	8.3	61.2	24.5	3.4	1.7	100.0
Pennsylvania	0.0	0.0	0.1	2.1	48.9	30.1	8.0	10.8	100.0
Rhode Island	0.0	0.0	0.0	0.4	44.0	34.2	8.4	12.9	100.0
South Carolina	0.2	2.6	4.9	9.1	39.7	22.0	12.6	7.6	100.0
South Dakota	0.0	2.0	3.5	4.9	48.4	23.5	8.4	9.4	100.0
Tennessee	0.4	1.7	3.2	8.8	51.6	22.4	6.5	5.4	100.0
Texas	0.0	0.3	1.8	9.8	53.7	20.9	6.3	7.3	100.0
Utah	0.0	0.6	4.7	14.2	59.8	18.0	2.5	0.2	100.0
Vermont	0.0	0.0	0.0	2.7	53.3	24.7	9.3	9.9	100.0
Virginia	0.0+	0.2	2.0	6.9	52.6	23.8	6.7	7.9	100.0
Washington	0.1	0.5	2.4	9.9	57.8	23.8	3.9	1.8	100.0
West Virginia	0.0	0.0	0.0	8.6	67.6	18.8	4.0	0.9	100.0
Wisconsin	0.4	1.3	3.6	9.8	61.4	18.4	3.7	1.4	100.0
Wyoming	-	-	-	-	-	-	-	-	-
U.S. Total	0.2	0.7	1.9	7.8	52.4	23.9	6.3	6.8	100.0

population in 1989, but only 6.8% of the PRF/MR population. The primary reasons for the disproportionately low rates of PRF/MR placement among children and youth are the relatively low overall rates of out-of-home placement of children and youth (only 18% of all persons in all public and private facilities for persons with mental retardation and related conditions) and the concerted efforts by most states to restrict the admission of children and youth to large PRF/MR. This is particularly evident in the youngest ages. For example, nationwide 21.6% of the U.S. population in 1989 was made up of persons 14 years and younger as compared with 2.8% of the large PRF/MR populations. The primary reason for the lower proportion of persons 63 years and older in PRF/MR than in the general population is the high use of nursing homes for long-term care of older persons with primary diagnosis of mental retardation and related conditions. In fact, the estimated 6,008 persons 63 years and older in PRF/MR in 1989 was considerably less than the estimated 17,946 persons with a primary diagnosis of mental retardation in nursing homes at the last National Nursing Home Survey in 1985 (Lakin, Hill & Anderson, 1991).

Level of retardation of residents by state. Table 2.5 presents the state-by-state distributions of residents of large PRF/MR by reported level of mental retardation. A total of 472 residents (0.6% of residents in PRF/MR reporting this statistic) were reported to not have mental retardation (i.e., to have normal or "borderline" intelligence). These persons are included in the "mild" group in Table 2.5. Nationally 63.7% of large PRF/MR residents were indicated to have profound mental retardation. All but three states (Missouri, Nevada, South Carolina) reported a majority of PRF/MR residents to have profound mental retardation. This compares with all but 5 states in 1987. In 16 states more than 70% of large PRF/MR residents were reported to have profound mental retardation. This compares with 5 states in 1985 and 12 states in 1987.

A great deal of variability was also found in states' use of large PRF/MR to house persons with mild and moderate mental retardation. Nationwide, 16.8% of residents were reported to have mild or moderate mental retardation. In eight states (Florida, Indiana, Iowa, Massachusetts, Missouri, Montana, Nevada, South Carolina) persons with mild or moderate mental retardation made up more than a quarter of large PRF/MR populations. In eight other states (Colorado, District of Columbia, Maryland, New Hampshire, North Carolina, North Dakota, South Dakota, and Wisconsin) less than 10% of PRF/MR populations were made up of persons with mild or moderate mental retardation.

Table 2.5
Level of Mental Retardation of Residents of Large State-Operated Residential Facilities by State on June 30, 1989

State	Level of Mental Retardation				Total
	Mild+	Moderate	Severe	Profound	
Alabama	6.6%	7.8%	18.7%	66.9%	100.0%
Alaska	4.8	9.7	32.3	53.2	100.0
Arizona	-	-	-	-	-
Arkansas	4.0	11.9	24.8	59.4	100.0
California	6.5	7.9	13.9	71.7	100.0
Colorado	4.2	1.4	6.7	87.7	100.0
Connecticut	6.2	12.5	21.0	60.3	100.0
Delaware	7.6	5.1	19.3	68.0	100.0
D.C.	3.2	4.0	9.2	83.5	100.0
Florida	17.5	14.8	15.4	52.2	100.0
Georgia	4.5	10.2	23.2	62.1	100.0
Hawaii	1.8	10.3	14.6	73.3	100.0
Idaho	-	-	-	-	-
Illinois	9.0	12.6	18.0	60.4	100.0
Indiana	17.0	10.3	18.4	54.3	100.0
Iowa	9.9	18.1	18.1	53.9	100.0
Kansas	8.3	7.7	12.9	71.1	100.0
Kentucky	2.4	7.7	22.9	67.0	100.0
Louisiana	5.8	6.7	19.7	67.8	100.0
Maine	8.6	9.3	27.6	54.5	100.0
Maryland	4.0	5.5	11.5	79.0	100.0
Massachusetts	11.6	14.0	23.9	50.4	100.0
Michigan	8.2	9.8	15.9	66.1	100.0
Minnesota	10.8	11.3	20.8	57.1	100.0
Mississippi	6.4	12.5	18.9	62.2	100.0
Missouri	12.8	13.8	28.5	45.0	100.0
Montana	7.5	19.3	6.5	66.7	100.0
Nebraska	7.7	7.5	12.6	72.2	100.0
Nevada	13.8	16.1	23.6	46.6	100.0
New Hampshire	1.7	6.1	18.3	73.9	100.0
New Jersey	5.8	8.9	20.1	65.3	100.0
New Mexico	6.4	11.0	23.1	59.6	100.0
New York	8.8	8.5	21.5	51.2	100.0
North Carolina	2.7	6.4	16.1	74.9	100.0
North Dakota	3.2	6.4	12.1	78.2	100.0
Ohio	9.2	13.7	17.6	59.5	100.0
Oklahoma	7.1	11.1	19.3	62.5	100.0
Oregon	8.0	8.8	10.1	73.1	100.0
Pennsylvania	4.6	7.0	20.2	68.2	100.0
Rhode Island	6.7	8.9	10.2	74.2	100.0
South Carolina	6.1	26.5	22.1	45.3	100.0
South Dakota	5.2	2.5	9.1	83.2	100.0
Tennessee	5.4	7.8	17.0	69.8	100.0
Texas	4.6	10.4	24.8	60.2	100.0
Utah	5.7	7.2	11.0	76.1	100.0
Vermont	4.4	11.0	31.9	52.7	100.0
Virginia	5.0	11.0	20.8	63.1	100.0
Washington	6.4	10.6	18.6	64.4	100.0
West Virginia	9.3	4.9	13.6	72.2	100.0
Wisconsin	2.9	6.0	20.5	70.6	100.0
Wyoming	-	-	-	-	-
U.S. Total	6.7	10.1	19.5	63.7	100.0

Selected additional conditions by state. Table 2.6 presents the reported prevalence of selected secondary conditions of large PRF/MR residents. Nationwide, 5.7% of PRF/MR residents were reported to be deaf. New Mexico (16.3%), California (13.1%), Colorado (13.1%) and Maine (12.5%) all reported prevalence rates of deafness among PRF/MR residents that were more than twice the national average. Nationwide, 41.5% of PRF/MR residents were reported to have epilepsy. Three quarters of the states with the prevalence of epilepsy reported for more than half of their PRF/MR residents reported prevalences between 30% and 49%. Nationwide 21.3% of large PRF/MR residents were indicated to have cerebral palsy. The reported prevalences of cerebral palsy varied considerably from state to state. In 8 states the prevalence of cerebral palsy among PRF/MR residents was indicated to be less than 12% while in 11 states it was indicated to be greater than 30%.

Individual PRF/MR were also asked to report the number of their residents with behavior disorders. "Behavior disorder" was not operationally defined which may account for some of the deviation among states from the national average of 46.6%. In 6 states between 65% and 75% of PRF/MR residents were reported to have behavior disorders. In 10 states less than 35% of the PRF/MR population was reported to have behavioral disorders.

Selected functional assistance needs of residents. Table 2.7 presents selected functional limitations of PRF/MR residents. Nationwide 31.3% of PRF/MR residents were reported to need assistance in walking. Reported rates varied from 64% in Colorado to 8% in Florida. In six states 45% or more of PRF/MR residents were reported to need assistance in walking. In 7 states less than 20% of PRF/MR residents were reported to need assistance in walking. Nationwide, 61.0% of PRF/MR residents were reported to need assistance in dressing. In 11 states 70% or more of PRF/MR residents were reported to need assistance dressing, while in 7 states less than 50% of PRF/MR residents were reported to need assistance in dressing. Nationwide 45.7% of PRF/MR residents were reported to need assistance with toileting. This included persons from 11 states where more than 5% of the PRF/MR residents were reported to need assistance with toileting, as well as persons from 9 states where less than 35% of PRF/MR residents were reported to need assistance in toileting.

Table 2.6
Selected Additional Conditions of Residents of Large State-Operated Residential Facilities by State on June 30, 1989

State	Deaf	Epilepsy	Cerebral Palsy	Behavior Disorder
Alabama	10.4%	34.6%	14.3%	30.8%
Alaska	9.7	51.6	9.7	72.6
Arizona	-	-	-	-
Arkansas	9.2	47.4	32.0	37.4
California	13.1	53.2	38.7	52.9
Colorado	13.1	60.5	15.7	65.1
Connecticut	7.1	35.2	8.7	34.1
Delaware	4.8	43.9	15.9	50.1
D.C.	2.8	-	13.6	36.1
Florida	5.1	15.0	13.8	54.4
Georgia	6.9	44.4	28.6	39.7
Hawaii	6.7	57.0	37.0	40.6
Idaho	-	-	-	-
Illinois	6.1	34.3	13.6	56.2
Indiana	3.0	41.5	18.1	43.2
Iowa	5.8	36.5	8.1	58.0
Kansas	1.4	58.1	11.4	62.4
Kentucky	8.2	36.6	15.9	37.0
Louisiana	3.2	48.1	24.4	32.4
Maine	12.5	23.3	14.0	56.3
Maryland	5.6	46.8	20.1	46.1
Massachusetts	5.8	40.6	14.1	39.4
Michigan	5.2	37.5	18.7	58.9
Minnesota	2.0	51.9	31.6	49.2
Mississippi	2.2	23.2	14.0	30.2
Missouri	5.6	45.5	15.8	50.9
Montana	0.5	57.5	38.7	12.9
Nebraska	3.0	48.7	10.0	33.8
Nevada	6.9	43.1	12.6	35.6
New Hampshire	-	45.2	33.9	18.7
New Jersey	2.7	38.7	29.2	38.5
New Mexico	16.3	56.8	43.0	42.0
New York	4.8	30.5	12.8	48.9
North Carolina	6.3	28.6	20.4	54.3
North Dakota	0.8	47.2	17.2	19.6
Ohio	5.4	40.7	9.1	66.3
Oklahoma	6.0	48.1	15.3	39.9
Oregon	3.1	47.6	31.5	74.4
Pennsylvania	2.7	38.6	13.2	41.8
Rhode Island	4.3	47.6	8.0	35.8
South Carolina	8.9	45.0	12.9	60.0
South Dakota	7.6	38.5	18.3	66.7
Tennessee	3.3	47.6	41.3	37.2
Texas	3.3	41.7	26.5	28.7
Utah	3.0	47.5	15.9	30.9
Vermont	3.3	59.3	23.1	51.1
Virginia	3.5	38.5	17.0	70.4
Washington	2.5	45.7	39.9	51.3
West Virginia	1.5	44.0	9.7	15.4
Wisconsin	7.4	53.3	30.5	50.2
Wyoming	-	-	-	-
U.S. Total	5.7	41.5	21.3	46.6

Table 2.7
Selected Functional Needs of Residents of Large State-Operated Residential Facilities by State on June 30, 1989

State	Functional Limitations		
	Needs Assistance to Walk	Needs Assistance with Dressing	Needs Assistance with Toileting
Alabama	23.9%	53.1%	37.9%
Alaska	24.2	38.7	64.5
Arizona	-	-	-
Arkansas	8.7	53.7	33.7
California	37.6	73.2	57.3
Colorado	64.0	-	-
Connecticut	16.9	46.9	26.1
Delaware	40.2	63.7	48.7
D.C.	41.8	67.9	56.6
Florida	8.0	37.1	35.8
Georgia	40.8	72.5	53.8
Hawaii	57.6	53.9	60.0
Idaho	-	-	-
Illinois	28.4	56.1	53.4
Indiana	17.8	56.8	34.1
Iowa	26.2	55.4	38.3
Kansas	38.0	62.0	53.8
Kentucky	12.8	63.5	50.2
Louisiana	32.1	71.6	67.5
Maine	31.5	59.5	35.8
Maryland	42.7	67.5	49.1
Massachusetts	36.7	57.2	42.0
Michigan	27.7	81.1	58.9
Minnesota	28.8	77.1	56.3
Mississippi	21.6	54.0	34.2
Missouri	21.6	38.0	25.3
Montana	32.3	64.5	38.7
Nebraska	43.2	68.6	33.8
Nevada	10.3	31.6	23.6
New Hampshire	-	-	-
New Jersey	29.7	66.8	28.7
New Mexico	46.0	67.9	57.8
New York	30.7	50.5	46.4
North Carolina	33.5	67.1	46.1
North Dakota	59.6	39.2	39.2
Ohio	18.7	50.7	29.8
Oklahoma	31.8	37.5	44.6
Oregon	-	-	-
Pennsylvania	31.5	64.6	50.4
Rhode Island	43.3	77.3	54.6
South Carolina	39.8	64.0	45.2
South Dakota	43.5	80.5	56.5
Tennessee	36.3	70.0	40.7
Texas	32.7	56.2	37.3
Utah	53.1	70.1	52.7
Vermont	31.3	55.5	36.8
Virginia	24.1	53.1	55.0
Washington	39.0	71.5	52.0
West Virginia	47.0	60.8	58.9
Wisconsin	36.1	78.1	61.7
Wyoming	-	-	-
U.S. Total	31.3	61.0	45.7

Residents in Movement

New admissions by age and level of mental retardation. Table 2.8 presents the distribution of persons newly admitted to specific PRF/MR in Fiscal Year 1989 by their age and level of mental retardation. The total number of new admissions in this table is somewhat greater than the reported first admissions in Table 1.8. Because Table 2.8 is based on surveys of individual PRF/MR, it includes "transfers" and former residents of other PRF/MR within a state among the new admissions reported by facilities. Data for Table 2.8 were supplied by PRF/MR housing 86.6% of PRF/MR residents. Data on total new admissions were provided by PRF/MR housing 90.4% of all PRF/MR residents and yielded a national estimate of 3,430 new admissions. As shown in Table 2.8 persons newly admitted to PRF/MR in FY 1989 presented a considerably different profile than the general population on June 30, 1989. In general they were considerably younger than the general population. For example 2.8% of the general population was 0-14 years old as compared with 16.3% of the new admissions. While 7.8% of the general PRF/MR population was persons 15-21 years, 20.8% of new admissions were in this age group. In contrast while persons 40 years or older made up 37.1% of the PRF/MR population, they made up only 22.8% of the new admissions.

Table 2.8
New Admissions to Large State-Operated Residential Facilities by Age
and Level of Mental Retardation in the Year Ending June 30, 1989

Level of Retardation	Chronological Age								Total(%)
	0-4	5-9	10-14	15-21	22-39	40-54	55-62	63+	
Borderline	3	3	11	15	32	7	1	0	72 (2.4%)
Mild	1	9	44	198	384	99	24	11	770 (25.4%)
Moderate	4	15	39	102	225	72	22	23	502 (16.6%)
Severe	12	39	54	132	211	95	44	32	619 (20.4%)
Profound	80	64	116	184	362	160	57	42	1,065 (35.2%)
Total	100	130	264	631	1,214	433	148	108	3,028
(%)	(3.3%)	(4.3%)	(8.7%)	(20.8%)	(40.1%)	(14.3%)	(4.9%)	(3.6%)	(100.0%)

Note. New admissions in the above Table 2.8 are persons admitted for the first time to the particular PRF/MR surveyed. In contrast the "first admission" statistics in Table 1.8 in Part 1 of this report reflect the number of persons who were admitted to any PRF/MR for the first time in Fiscal Year 1989. As reflected in Table 2.8 there are more people in the former category than in the latter. Statistics in Table 2.8 represent PRF/MR housing 86.6% of all PRF/MR residents.

Newly admitted PRF/MR residents Fiscal Year 1989 were also considerably more likely to have mild mental retardation and considerably less likely to have profound mental retardation than was the general PRF/MR population. Persons with mild or borderline mental retardation made up 27.8% of new admissions as compared with 6.7% of the general PRF/MR population. Persons with profound mental retardation made up only 35.2% of new admissions as opposed to 63.7% of the PRF/MR population. Youth (15-21 years) with mild or borderline mental retardation made up 7.0% of all new admissions as compared with 0.7% of the general population.

Readmissions by age and level of mental retardation. Table 2.9 presents the distribution of persons readmitted to specific PRF/MR in Fiscal Year 1989 by their age and level of mental retardation. The total number of readmissions is somewhat smaller than the reported number of readmissions in Table 1.9. Table 2.9 is based on surveys of individual PRF/MR and includes as readmissions only persons readmitted to the specific

Table 2.9
Readmission to Large State-Operated Residential Facilities by Age
and Level of Mental Retardation in the Year Ending June 30, 1989

Level of Retardation	Chronological Age							Total(%)	
	0-4	5-9	10-14	15-21	22-39	40-54	55-62		
Borderline	0	10	13	4	20	6	2	1	56 4.3%
Mild	0	2	10	31	185	64	6	5	303 23.3%
Moderate	2	1	8	40	121	57	6	17	252 19.4%
Severe	0	8	19	25	135	42	14	7	250 19.2%
Profound	2	12	24	64	199	101	24	12	438 33.7%
Total	4 0.3%	33 2.5%	74 5.7%	164 12.6%	660 50.8%	270 20.8%	52 4.0%	42 3.2%	1,299 100.0%

Note. Readmissions in the above Table 2.9 are persons readmitted to the particular PRF/MR surveyed. In contrast the "readmission" statistics in Table 1.9 (Part 1) of this report reflect the number of persons who were readmitted to any PRF/MR in the state during Fiscal Year 1989. As reflected in comparison of the two tables, there are more persons in the latter category than in the former. Statistics in Table 2.9 represent PRF/MR housing 86.6% of all PRF/MR residents.

PRF/MR surveyed. Table 1.9 defines as readmissions persons who previously resided in any of a state's PRF/MR who reenter any state PRF/MR. In all, PRF/MR housing 94.3% of PRF/MR residents reported a total of 1,448 readmissions in Fiscal Year 1989, yielding a national estimate of 1,535 readmissions.

Readmissions by age and level of mental retardation reported in Table 2.9 were based on the reports of facilities housing 86.6% of PRF/MR residents on June 30, 1989. As indicated in Table 2.9 the profile of readmissions is more similar to that of new admissions than of the general PRF/MR population. As with new admissions there was a relatively high proportion of persons with "borderline" and mild mental retardation (27.6% vs. 6.7% in the general PRF/MR population) and a relatively low proportion of persons with profound mental retardation (33.7% vs. 63.7% in the general PRF/MR population). While readmissions were somewhat older than new admissions, they tended to be younger than the general PRF/MR population (e.g., 21.2% vs. 10.6% 21 years or younger; 3.2% vs. 6.8% 63 years or older).

Discharges by age and level of mental retardation. In the year ending June 30, 1989, PRF/MR housing 90.7% of all PRF/MR residents reported 6,066 total discharges, yielding a national estimate of 6,698 total discharges. About 10% of these persons were actually transferred to other large PRF/MR. Table 2.10 presents the distribution of persons discharged from PRF/MR in Fiscal Year 1989 by age and level of mental retardation. It is based on the reports of facilities housing 84.9% of all PRF/MR residents on June 30, 1989. The age distribution of PRF/MR discharges was similar to the age distribution of the general PRF/MR

Table 2.10
Discharges from Large State-Operated Residential Facilities
by Age and Level of Mental Retardation, Year Ending June 30, 1989

Level of Retardation	Chronological Age								Total(%)
	0-4	5-9	10-14	15-21	22-39	40-54	55-62	63+	
Borderline	8	2	1	15	60	20	4	4	114 2.0%
Mild	6	14	46	200	590	192	70	38	1,156 20.5%
Moderate	5	10	19	124	518	203	57	50	986 17.4%
Severe	3	21	30	105	585	325	79	74	1,222 21.6%
Profound	19	31	65	182	1,171	504	118	84	2,174 38.5%
Total	41 0.1%	78 0.1%	161 2.8%	626 11.1%	2,924 51.7%	1,244 22.0%	328 5.8%	250 4.4%	5,652 100.0%

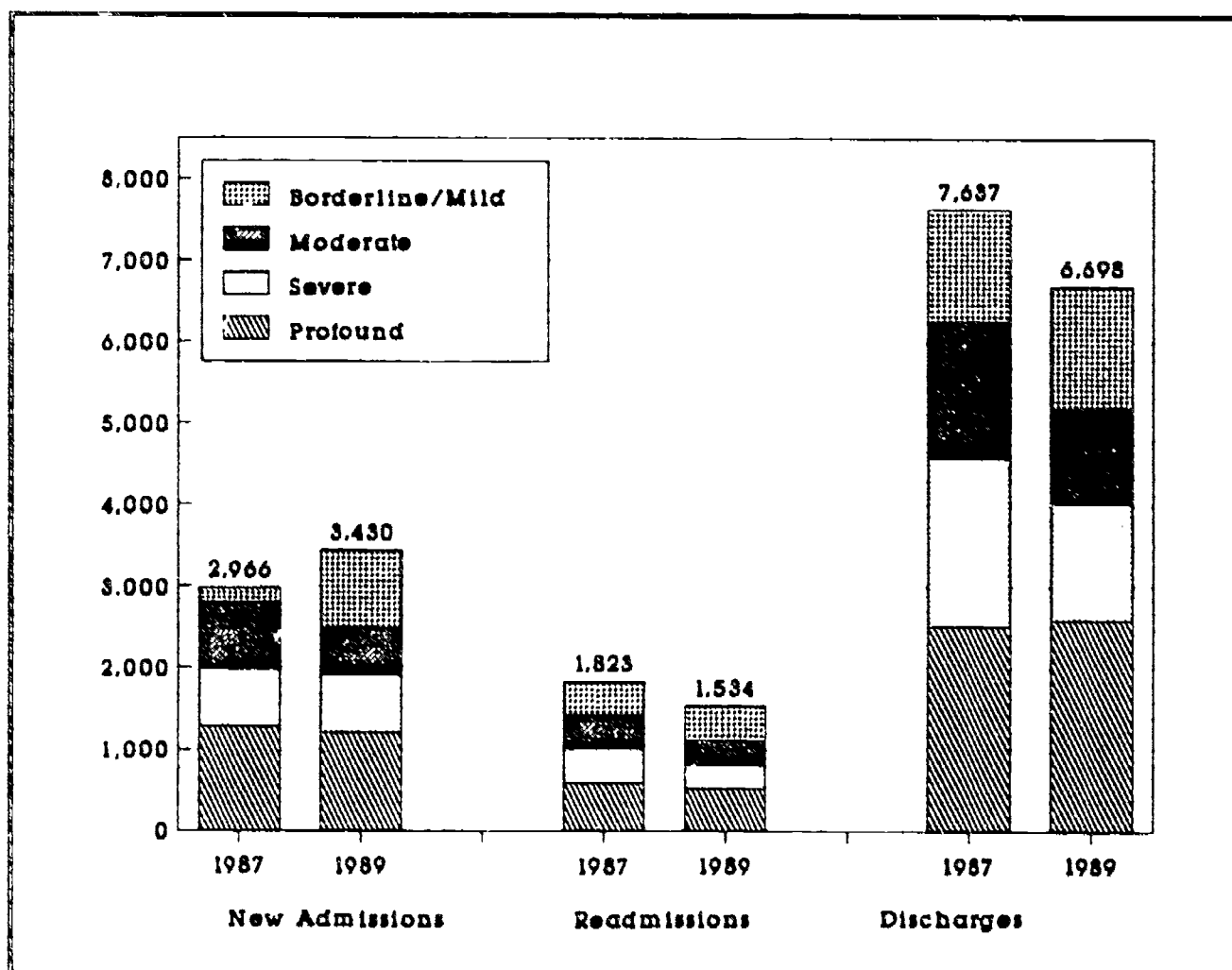
Note. Discharges in the above Table 2.10 are persons discharged from the specific PRF/MR surveyed and therefore include some "transfers" (about 10% of the reported discharges). In contrast the "release" statistics in Table 1.10 in Part 1 of this report reflect the number of people released from PRF/MR generally in Fiscal Year 1989. Statistics in Table 2.8 represent PRF/MR housing 84.9% of all PRF/MR residents.

population; about 14% of the persons discharged were 21 years or younger as compared with 10.6% of the general population. Persons between the ages of 22 and 39 years made up 52% of both the group of PRF/MR discharges and the general PRF/MR population. Persons 63 years and older made up somewhat higher proportion of persons in the general PRF/MR population (6.8%) than among people being discharged (4.4%).

In contrast the diagnostic characteristics of people discharged were much more similar to persons being admitted to PRF/MR in Fiscal Year 1989. Persons with profound mental retardation made up 38% of discharges and 35% of combined new admissions and readmissions, as compared with 63.7% of the general PRF/MR population. Persons with "borderline" and mild mental retardation made up 22% of discharges and 28% of combined new admissions and readmissions, as compared with 6.7% of the general PRF/MR population. Discharges outnumber admissions for persons of all levels of mental retardation. It was notable, however, that the smallest relative difference was among persons with "borderline" and mild mental retardation, for whom discharges were only 5% more than admissions. For persons with profound mental retardation discharges were 31% more than admissions.

Persons in movement in 1987 and 1989. Figure 2.3 compares the number and distribution by level of mental retardation of newly admitted, readmitted and released residents of PRF/MR in 1987 and 1989. Admission patterns were generally similar in 1987 and 1989, although there were somewhat fewer persons in each of these categories. In 1989 the average daily population of PRF/MR was about 6.4% less than in 1987. Total admissions (new admissions and readmissions) were 7.9% fewer in 1989 than in 1987 and discharges were 12.8% fewer in 1989 than in 1987. This general pattern of decreasing movement into and out of PRF/MR has been evident for the past 10 years (see Table 3.3). Figure 2.3 also shows the characteristics of persons in movement to be remarkably consistent across movement categories (i.e., new admissions, readmissions and discharges) as well as between years (1987 and 1989).

Figure 2.3
Distribution of Admissions and Discharges for Large State-Operated Residential
Facilities by Level of Mental Retardation in Fiscal Years 1987 and 1989



Previous placement of admissions. Table 2.11 summarizes the previous place of residence of persons admitted to specific PRF/MR for the first time and of people returning to specific PRF/MR after a previous discharge. Statistics are provided for Fiscal Years 1985, 1987, and 1989. In 1989, as in 1985 and 1987, the most frequent previous place of residence of new admissions was the home of the residents' family or relatives (28.5% of all new admissions in 1989). Persons transferring from other state institutions of 64 or more residents were the second most frequently admitted group in all three years (18.5% of 1989 new admissions). Of the 93% of the 1989 new admissions to PRF/MR whose previous place of residence was reported, most (51.5%) were persons coming from public and private mental retardation, mental health, nursing and correctional facilities of 16 or more residents. Persons readmitted to PRF/MR in 1989 most frequently came

from group homes of 15 or fewer residents (22.9%) or from their family home (19.6%). Over a quarter of PRF/MR readmissions in 1989 were persons coming from other public institutions for persons with developmental or mental health disabilities. A notable trend between 1985 and 1989 was the decrease in persons readmitted from their family home or the home of a relative (36.8% in 1985, 29.1% in 1987, 19.6% in 1989). This trend probably is the result of the interaction between the historical tendency for children and youth to make up a highly disproportionate share of persons discharged to their homes, and the greatly reduced number of children and youth living in PRF/MR.

Table 2.11
Previous Placement of Persons Admitted or Readmitted to Large State-Operated Residential Facilities:
Fiscal Years 1985, 1987 and 1989

Previous Placement	New Admissions			Readmissions		
	1985	1987	1989	1985	1987	1989
Parents/relatives	39.2	29.0	28.5	36.8	29.1	19.6
Foster home	3.5	3.4	5.2	7.1	7.5	9.3
Group home (15 or fewer res.)	5.6	7.0	8.4	19.7	17.9	22.9
Group facility (16-63 res.)	3.5	4.2	4.0	4.1	3.9	2.4
Nonstate institution (64+ res.)	1.8	2.6	3.3	2.5	3.8	2.9
State institutions (64+ res.)	20.6	27.9	18.5	7.4	14.6	13.5
Boarding home/board and care	0.5	0.7	1.7	1.2	0.4	0.9
Nursing facility	1.6	2.4	2.7	2.0	2.4	3.1
Semi-ind/independent living	1.0	0.8	1.3	0.6	0.9	1.3
Mental health facility	13.6	10.0	16.3	8.5	8.4	12.8
Correctional facility	2.3	2.7	3.0	1.7	1.5	0.9
Unknown/other	6.7	9.3	7.2	7.9	8.9	10.4
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Note. Statistics on previous placements for new admissions and readmissions in Fiscal Year 1989 are based on the reports of PRF/MR housing 93.9% of all PRF/MR residents.

New residence of released residents. Table 2.12 shows the new place of residence of people leaving PRF/MR in Fiscal Year 1989, and for comparative purposes in Fiscal Years 1985 and 1987 as well. In 1989 about half (51%) of all persons released from PRF/MR whose subsequent placement was reported went to group homes of 15 or fewer residents. Another 21% of released residents whose placement was known went to natural, adoptive or foster homes. The decreasing percentage of released residents moving to their parents' or relatives' homes (from 17% in 1985 to 12% in 1989) is probably at least in part a product of the reduced number of children and youth in PRF/MR, who have historically made up the majority of residents moving home following release (Sigford, Bruininks, Lakin, Hill & Heal, 1982). Post release placement patterns were generally quite stable between 1985 and 1989. The most notable changes were the increase in group home

placement (from 40.4% in 1985 to 48.8% in 1989) and the decrease in placements in large (16 or more residents) public and private residential facilities for persons with developmental disabilities (from 21.3% in 1985 to 18.1% in 1989). Nursing home placements also decreased from 4.1% of releases in 1985 to 2.0% in 1989.

Table 2.12
New Place of Residence of Persons Released from Large State-Operated Residential Facilities

New Place of Residence	Fiscal Year		
	1985	1987	1989
Home of parents or relative	17.1	11.3	12.4
Foster home	7.1	7.0	7.4
Group home (15 or fewer res.)	40.4	46.6	48.8
Group facility (16-63 res.)	7.4	6.7	5.3
Nonstate institution (64+ res.)	3.8	3.6	2.6
State institution (64+ res.)	10.1	12.2	10.2
Boarding home/Board and care	3.2	0.9	2.3
Nursing facility	4.1	4.4	2.0
Semi-ind./Independent living	1.4	4.9	1.9
Mental health facility	0.8	1.2	1.4
Correctional facility	0.2	0.5	1.3
Unknown/Other	3.7	0.7	4.3
	100.0%	100.0%	100.0%

Note. Statistics on new place of residence are for persons leaving a specific PRF/MR and therefore include transfers between PRF/MR. These statistics were reported by PRF/MR housing 93.1% of all PRF/MR residents.

PART 3: LONGITUDINAL TRENDS IN LARGE STATE-OPERATED RESIDENTIAL FACILITIES, 1950-1989

Introduction

Part 3 of this report presents a longitudinal view of changing patterns in the placement of persons with mental retardation and related conditions in large state-operated residential facilities from 1950 to 1989. Although in recent years states have begun to develop small (15 or fewer residents) state-operated facilities, the vast majority of persons in state-operated facilities remain in the large institutions. As the once overwhelmingly predominant model of residential care (large state facilities housed 90.4% of all persons with mental retardation in residential settings in 1967), few statistics serve as better broad indicators of the changing patterns of residential services for persons with mental retardation and related conditions than the changes taking place in large state institutions in the United States.

The longitudinal data presented here derive from several sources. Data for both PRF/MR and PRF/Other for the years 1950 to 1968 are from the National Institute of Mental Health's surveys of "Patients in Institutions." Data on state mental retardation facilities for Fiscal Years 1969 and 1970 come from surveys conducted by the Office on Mental Retardation Coordination, now the Administration on Developmental Disabilities. Data on state mental retardation facilities for 1971 through 1977 come from the surveys of National Association of Superintendents of Public Residential Facilities for the Mentally Retarded. Data on PRF/Other for 1969 to 1977 come from the National Institute of Mental Health's surveys of "Patients in State and County Mental Hospitals." Data on both PRF/MR and PRF/Other for the years 1978 through 1989 come from the National Recurring Data Set Project of the Center for Residential and Community Services, University of Minnesota. Data for 1989, the latest survey in this series, are presented in detail in Part 1 of this report. Appendix C provides notes on the specific uses of the data from these sources. The reference list includes specific citations for the surveys and statistical summaries used to complete the sets of longitudinal data on changing patterns in the utilization of state-operated residential facilities that are presented in the following pages. A detailed description of the methodologies used in these surveys, as well as those that preceded them, can be found in Lakin (1979).

Average Daily Population of Large State-Operated Mental Retardation Facilities

The gradual depopulation of state-operated residential facilities for persons with mental retardation and related conditions has been apparent in national statistics since 1967. There has been a decreasing total residential population of state institutions for all types of mental disability (i.e., mental health and developmental disability) since 1956. Although the total population in state mental hospitals peaked in 1955, the number of persons with a primary diagnosis of mental retardation in state-operated facilities primarily for persons with mental illness (i.e., PRF/Other) continued to increase until 1961. In 1961, there were nearly 42,000 persons with a primary diagnosis of mental retardation in such facilities. The combined total of persons with mental retardation and related conditions in state-operated residential facilities (PRF/MR and PRF/Other) in 1961 was 209,114. By 1967 the number of persons with mental retardation in state hospitals for persons with mental illness had decreased to 33,850, but the total number of persons with mental retardation and related conditions in all state-operated residential facilities had increased to 228,500, 194,650 of whom were in state mental retardation institutions. This was the highest total ever.

Since 1967 the number of persons with mental retardation and related conditions in all state-operated residential facilities has decreased by about 60%. During this period the numbers of persons with mental retardation in PRF/Other decreased much more rapidly than did the number of persons with mental retardation in PRF/MR. The different rates of depopulation reflect a number of factors. For one, the total rate of depopulation of state mental health facilities has been much more rapid than the rate of depopulation of state mental retardation facilities. Between 1965 and 1985 the total population of state mental health institutions decreased from about 475,000 to 114,000 residents (Zappolo, Lakin, & Hill, 1990). This rapid depopulation and frequent closing of facilities caused major reductions in residents with all types of mental disability, including mental retardation. Relatedly over the years, many PRF/Other became primarily dedicated to populations with mental retardation or developed independent PRF/MR units on the grounds of what were historically public psychiatric facilities.

A driving force in the reduction of residents with mental retardation in PRF/Other has been the general movement toward deinstitutionalization and specific concerns about the appropriateness of placement

in psychiatric facilities. However, extremely important, too was the Medicaid legislation in the late 1960s and early 1970s that allowed states to obtain federal cost-sharing of residential services to persons with mental retardation and related conditions in mental retardation facilities and in nursing homes. This legislation continued exclusion of institutions for "mental diseases" from participation in Medicaid, except for children and elderly residents. However, distinct units for persons with mental retardation and related conditions within those institutions could become ICF-MR certified. Many have and within the definitions employed in this study are classified as PRF/MR.

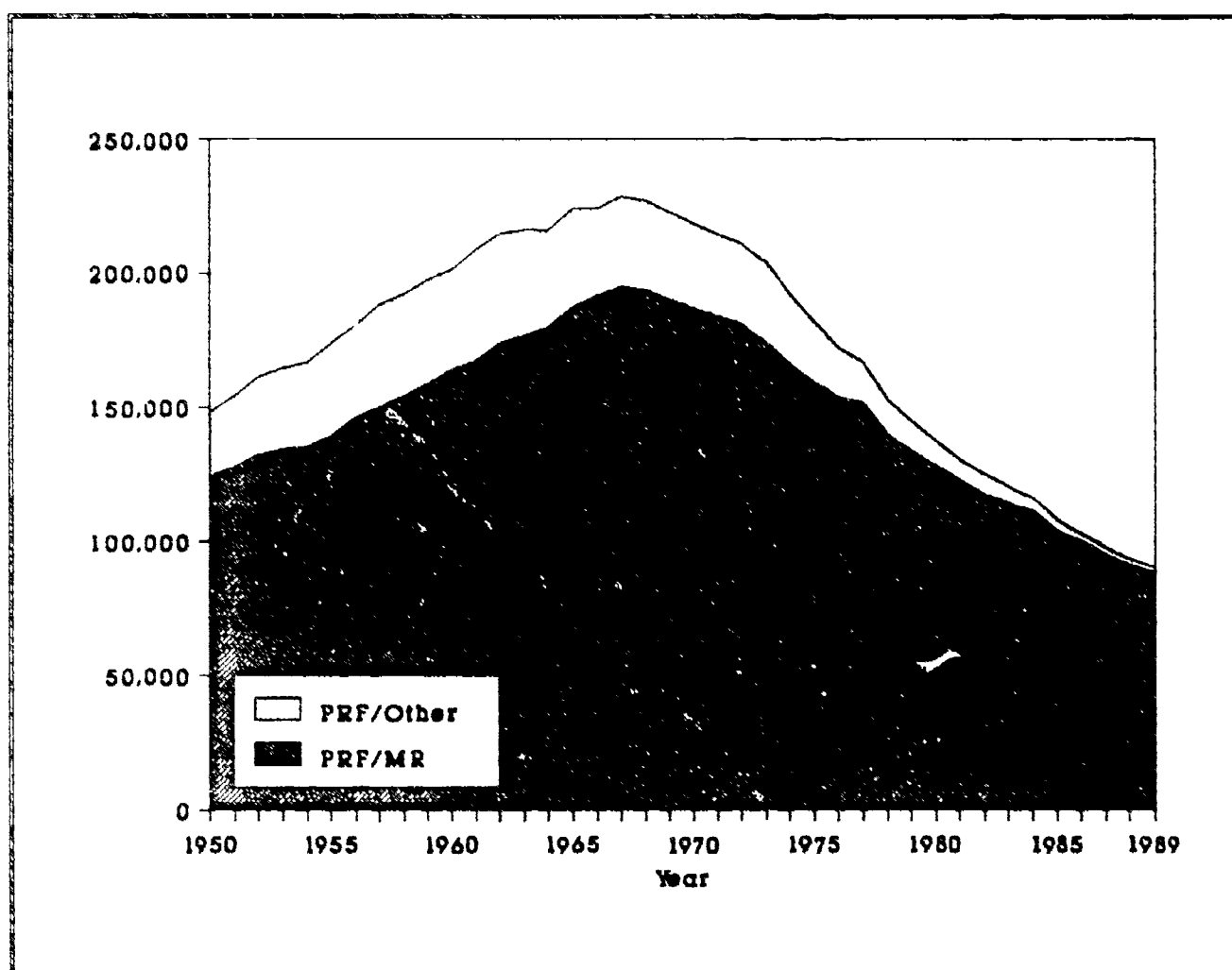
Figure 3.1 shows the relative contribution of PRF/MR and PRF/Other programs to the total average daily population of persons with mental retardation in large state-operated residential facilities. The average daily number of persons with mental retardation in large PRF/MR in FY 1989 (88,691) was only 45.6% of the average number in large PRF/MR in 1967. More impressively the average number of persons with mental retardation and related conditions in all large state institutions in FY 1989 (90,296) was just 39.5% of the average number in FY 1967 (228,500). The combined national total of people with mental retardation and related conditions in PRF/MR and PRF/Other in 1989 was the lowest total since 1933.

Selected Data Points for Figure 3.1: Average Daily Population of Large State-Operated Mental Retardation Facilities, 1950-1989

Year	PRF/MR	PRF/Other	Total
1950	124,304	23,905	148,209
1955	138,831	34,999	173,830
1960	163,730	37,641	201,371
1965	187,305	36,825	224,130
1967	194,650	33,850	228,500
1970	186,743	31,884	218,627
1973	173,775	30,237	204,012
1977	151,532	15,524	167,056
1980	128,058	9,405	137,463
1981	122,898	7,866	130,764
1982	117,160	7,865	125,026
1984	111,333	5,096	116,429
1985	103,629	4,536	108,165
1986	100,190	3,106	103,296
1987	94,696	2,837	97,533
1988	91,582	1,933	93,515
1989	88,691	1,605	90,296

Note. Some PRF/Other data are estimated (see notes in Appendix C).

Figure 3.1
Average Daily Population of Large State-Operated Mental Retardation Facilities, 1950-1989



Average Daily Population of Large State-Operated
Mental Retardation Facilities per 100,000 of the General Population

Since 1967 there has been a substantial decrease in the number of people with mental retardation and related conditions in state-operated residential facilities. But as notable as has been the reduction in total residents, it appears even more substantial when indexed for the growing total population of the United States. Comparing the population of state-operated facilities to the general population of the U.S. permits a better picture of the relative use of state-operated facilities as residential placements for persons with mental retardation and related conditions. The average annual placement rates per 100,000 of the total U.S. population for PRF/MR and PRF/Other are shown in Figure 3.2.

The trends in the placement rates of persons with mental retardation and related conditions in all state-operated residential facilities are generally similar to trends for the total populations. However, the rate of change in the placement rate is substantially greater because the U.S. population has increased as the

population of state-operated facilities has decreased. Another notable difference between the two figures is in their peak years. While the total number of persons with mental retardation and related conditions residing in all state-operated residential facilities and the number residing in facilities primarily for persons with mental retardation peaked in 1967, the placement rate of persons with mental retardation in all state-operated facilities (PRF/MR and PRF/Other) peaked in 1965 at 115.8 per 100,000 of the general population. This compares with 36.4 in FY 1989. The highest placement rate in state-operated facilities primarily for persons with mental retardation was in 1967. That year's placement rate of 98.6 compares with the 1989 rate of 35.7. The 1989 placement rate for state-operated mental retardation facilities fell below the rate of 39.3 in 1922, when there were 66 PRF/MR operating in 40 states, and approached the rate of 30.0 in 1916, when there were only 40 PRF/MR operating in the United States, with 16 states not yet having one (Lakin, 1979).

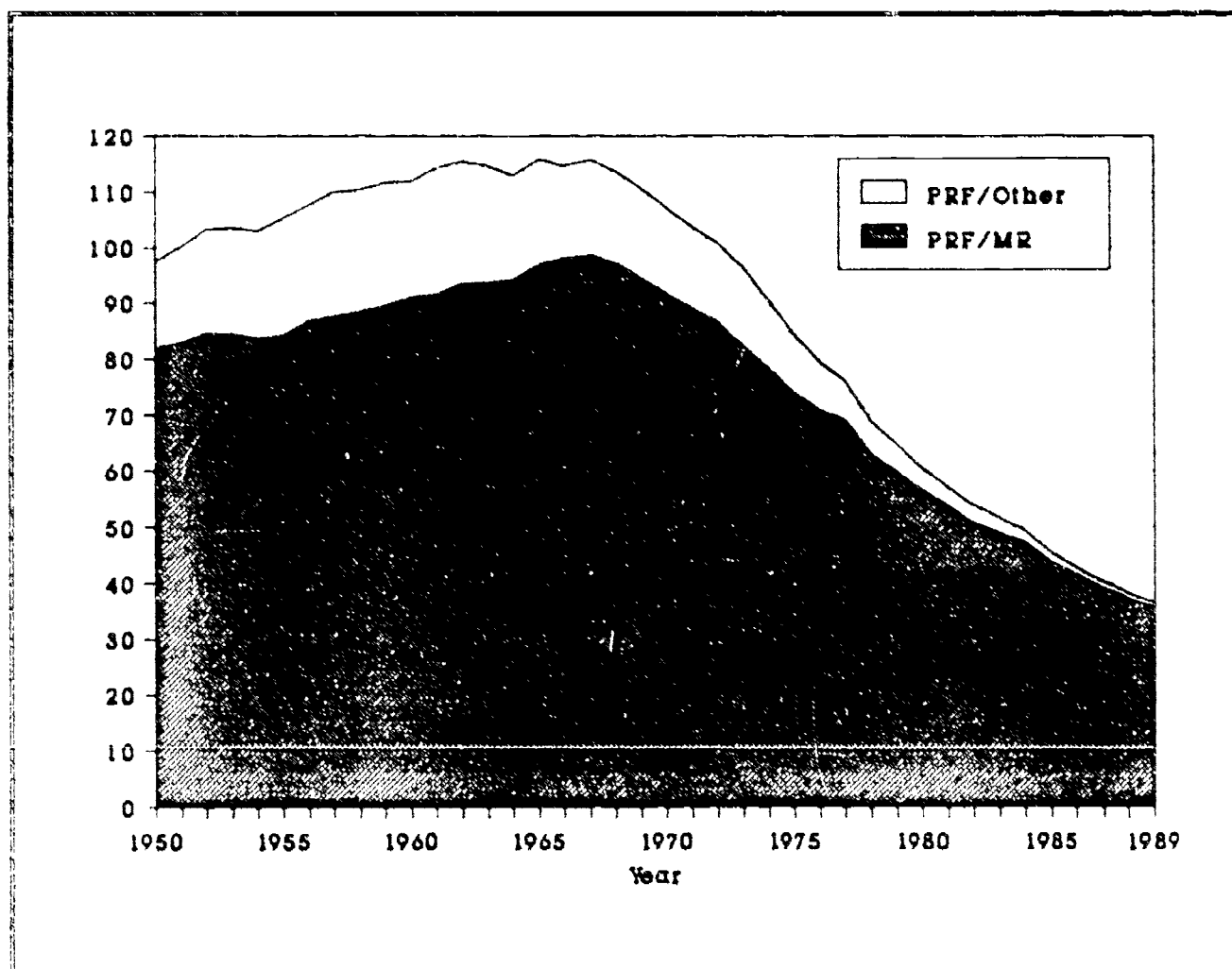
As noted earlier, some of the decrease in the placement rate in "PRF/Other" facilities between 1973 and 1989 may reflect changing definitions. During that period some facilities historically serving psychiatric populations either through official or operational designation became facilities primarily serving persons with mental retardation and related conditions. Others developed specific administratively distinct units of traditional psychiatric facilities for these purposes. The decrease shown between 1977 and 1980 was also to a minor extent affected by the inclusion in the PRF/Other totals of only those residents with mental retardation in mental retardation units or in PRF/Other with 10 or more residents with mental retardation. But far more important in this trend were the major changes in philosophy and federal reimbursement of the costs of care that brought considerable disfavor to providing residential services to persons with mental retardation in psychiatric facilities. The statistics in Figure 3.2 show clearly a substantial decrease in the rate of placement of persons with mental retardation and related conditions in state-operated residential facilities. The placement rate in 1989 for large PRF/MR was only 36.2% of the 1967 placement rate. The placement rate for all large state-operated facilities (PRF/MR and PRF/Other) in 1989 was just 31.4% of the 1967 placement rate.

Selected Data Points for Figure 3.2: Average Daily Population of Large State-Operated Mental Retardation Facilities per 100,000 of the General Population, 1950-1989

Year	U.S. Population in 100,000s on 7/1	PRF/MR	PRF/Other	Total
1950	1,518.68	81.85	15.74	97.59
1955	1,650.69	84.10	21.20	105.30
1960	1,799.79	90.97	20.91	111.88
1965	1,935.26	96.79	19.03	115.82
1967	1,974.57	98.58	17.14	115.72
1970	2,039.84	91.55	15.63	107.18
1973	2,113.57	82.22	14.31	96.53
1977	2,197.60	68.95	7.06	76.01
1980	2,272.36	56.35	4.14	60.49
1981	2,295.42	53.54	3.43	56.97
1982	2,318.22	50.54	3.39	53.93
1984	2,361.58	47.14	2.16	49.30
1985	2,382.91	43.49	1.90	45.39
1986	2,387.70	41.96	1.30	43.26
1987	2,433.05	38.92	1.17	40.09
1988	2,458.07	37.26	0.79	38.04
1989	2,482.43	35.73	0.65	36.38

Note. Some PRF/Other data are estimated (see notes in Appendix C).

Figure 3.2
Average Daily Population of Large State-Operated
Mental Retardation Facilities per 100,000 of the General Population, 1950-1989



Movement Patterns in Large State-Operated Mental Retardation Facilities

From the beginning of this century until the mid-1960s, resident movement statistics of state-operated residential facilities for persons with mental retardation were relatively stable. During that period first admissions and discharges both steadily increased, but state facility populations grew as first admissions substantially outnumbered discharges. During this same period readmissions remained relatively low because once placed, people tended to remain institutionalized. From 1903 to 1965 the annual number of deaths in state institutions increased substantially, but death rates (deaths per 1,000 average daily population) decreased steadily from 41.3 to 19.1.

By the mid-1960s these historical patterns began to change. In 1965 the number of first admissions to state-operated facilities began to decrease, dropping below the increasing number of discharges by 1968. The number of readmissions increased substantially throughout the 1970s as return to the institution was a frequently used solution to problems in community facilities. Since 1980 readmissions have been reduced fairly steadily, but readmissions remain nearly as frequent as new admissions (2,530 and 2,807, respectively in 1989). Over this same period the sum of first admissions and readmissions had remained consistently between 2,300 and 3,000 less than the number of discharges. However in 1988, there were only about 1,200 more discharges than admissions and in 1989 only 800 more. Because of differences among states and various earlier surveys in defining and counting transfers, first admissions, and readmissions, all types of admissions have been combined for 1950 to 1989. These are reported as the data points for Figure 3.3.

In recent years, the number of discharges has fallen far below the numbers apparent in the first 12 years of PRF/MR depopulation. The period of the greatest number of discharges was the decade of the 1970s when discharges were consistently between 14,000, and 17,000 per year. In 1989 there were only about 6,100 discharges. This was about the same number as in 1988, but considerably less than the 9,400 in 1986 and 8,000 in 1987. Deinstitutionalization literally connotes a process of discharging people from institutions, but Figure 3.3 shows clearly that it has also encompassed important efforts to avoid initial institution placements. The resident movement patterns shown in Figure 3.3 indicate that this latter "preventative" policy (i.e., reducing admissions to state institutions) has actually accounted for relatively more of the reduction in state mental

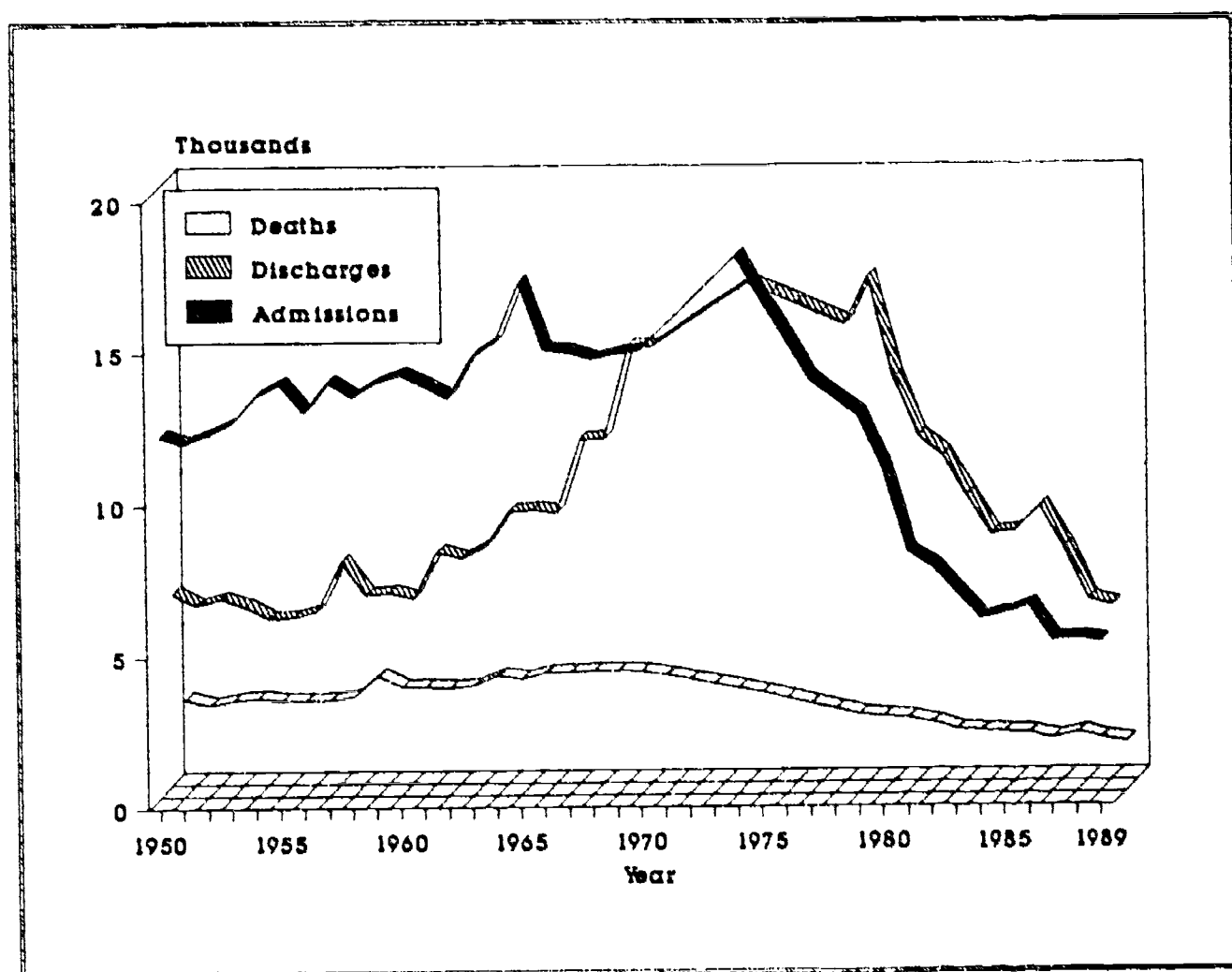
retardation facility populations over the past decade than has the number of releases, although both clearly have been crucial to reducing PRF/MR populations.

In the ten year period from 1979 to 1989 there were substantial decreases in both admissions to and discharges from state-operated facilities (from 12,802 to 5,337 and from 16,980 to 6,122 respectively). However, admission and discharge rates have been relatively stable in the last five years. While state institutions would appear from the statistics to be considerably less dynamic in terms of resident movement than in earlier years, it must be remembered that in 1989 these facilities had less than half their total populations of 1967. Total deaths reported for 1989 was similar to previous years. In 1989 the number of deaths as a percentage of residents at the end of the year was 1.36%. This compares with 1.32% in 1986, 1.59% in 1987 and 1.45% in 1988. Deaths as a percentage of residents at year's end have ranged between 1.3% and 1.6% in each of the years between 1978 and 1989.

Selected Data Points for Figure 3.3: Movement Patterns in Large State-Operated Mental Retardation Facilities, 1950-1989

Year	Admissions	Discharges	Deaths
1950	12,197	6,672	2,761
1955	13,906	5,845	2,698
1960	14,182	6,451	3,133
1965	17,225	9,358	3,585
1967	14,904	11,665	3,635
1970	14,979	14,702	3,496
1974	18,075	16,807	2,913
1978	10,508	15,412	2,154
1979	12,802	16,980	2,087
1980	11,141	13,622	2,019
1981	8,329	11,713	1,873
1982	7,844	11,076	1,634
1984	6,123	8,484	1,555
1985	6,276	8,619	1,508
1986	6,535	9,399	1,322
1987	5,398	8,049	1,513
1988	5,431	6,323	1,333
1989	5,337	6,122	1,180

Figure 3.3
Movement Patterns in Large State-Operated Mental Retardation Facilities, 1950-1989



Annual Per Resident Costs for Care in Large State-Operated Mental Retardation Facilities

The costs of care provided in state-operated residential facilities for people with mental retardation and related conditions have increased dramatically since 1950, when the annual cost of care for state-operated facility residents was about \$750.00. Thirty-nine years later the cost of care in state residential facilities was on the average over \$67,000 per year. Even in dollars adjusted for changes in the Consumer Price Index over this period, costs of care in 1989 were over 17 times as great as in 1950. Figure 3.4 shows the trends in residential care costs in both actual and adjusted dollars (\$1=1967) between 1950 and 1989. In terms of "real dollar" equivalents, the annual cost of care in state residential facilities for people with mental retardation increased from just over \$1,000 to \$18,000 over the 29 year period. That rate of increase represents an annual after inflation compounded growth of slightly over 10% per person per year. For Fiscal Year 1989 states reported a 13.9% real dollar increase in per resident costs from Fiscal Year 1988. This was an unusually large

increase, but following the unusually small increase (0.8%) from 1987 to 1988, is as likely to represent realignment of costs to historical patterns of steady increase than to be the beginning of dramatic increases.

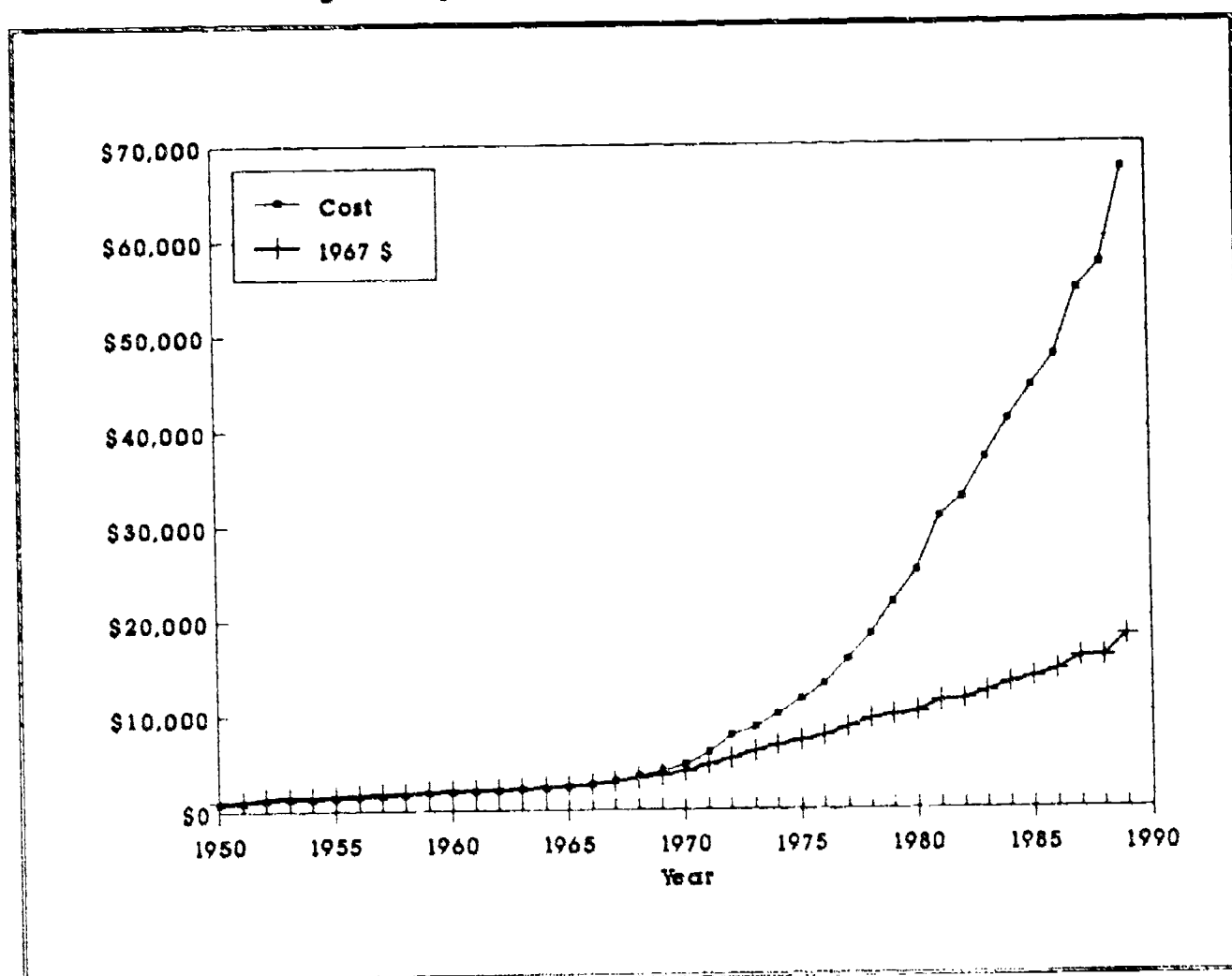
A number of factors have contributed to the steady increases in the costs of residential care. One contributing factor has been the increasingly disabled population of persons served in state-operated facilities. For example, in 1940 about 65% of all residents of state-operated facilities for people with mental retardation had borderline, mild, or moderate retardation. In 1964, 40% of residents were so classified. By 1977, that proportion had decreased to 27% and in 1989, only about 17% of all residents were identified as having borderline, mild, or moderate retardation (see Part 2). Associated with these changes have been increased intensity and specialization of professional staff employed to serve remaining residents and the relatively lower reliance on residents with less severe disabilities in operating and maintaining facilities.

Other important contributions to increasing costs have come from legislative and judicial efforts to upgrade the quality of living and habilitation provided within public residential facilities. While the desire to improve care in state-operated facilities was evident in the 1950s and 1960s, two major factors began to exercise considerable upward pressure on the costs of care in the early 1970s. The first of these was the Intermediate Care Facility for the Mentally Retarded (ICF-MR) program enacted in 1971. This program currently offers Federal sharing through Medicaid of half to three-quarters of the costs of residential care depending on the relative wealth of states, under the condition that facilities meet fairly demanding program, staffing, and physical plant standards. This program has significantly cushioned the impact of rapidly increasing institution costs for the states. For example, in 1970, one year before enactment of the ICF-MR program, the average annual per resident cost of state institution care was about \$4,000. In 1989, with the average annual per resident cost in real dollars \$14,000 more, states' share of those increases was only about \$4,000 per resident per year. Court decisions and settlement agreements have also had significant impact on institution costs nationally in their frequent requirement of substantial effort by states to upgrade the quality of supervision, habilitation, and residential environments in state-operated residential facilities.

Selected Data Points for Figure 3.4: Average Annual Per Resident
Costs of Care in Large State-Operated Mental Retardation Facilities, 1950-1989

Year	Cost	Cost (\$1=1967)
1950	745.60	1,034.15
1955	1285.50	1,603.02
1960	1867.70	2,104.90
1965	2,361.08	2,498.02
1967	2,965.33	2,965.33
1970	4,634.85	3,985.25
1974	9,937.50	6,728.17
1977	16,143.95	8,894.74
1980	24,944.10	10,127.30
1981	30,645.40	11,246.86
1982	32,758.75	11,400.04
1984	40,821.60	13,103.73
1985	44,270.85	13,723.96
1986	47,555.85	14,456.98
1987	54,516.40	15,755.24
1988	57,221.05	15,881.50
1989	\$67,200.15	\$18,096.12

Figure 3.4
Average Annual Per Resident Cost of Care
in Large State-Operated Mental Retardation Facilities, 1950-1989



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CENTER FOR RESIDENTIAL AND COMMUNITY SERVICES

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March 8, 1990

Dear State Data Person:

In the Developmental Disabilities Assistance and Bill of Rights Act of 1987, Congress authorized funding for an Ongoing Data Collection System on residential services, employment services and expenditures. One of the parts of this "system" is the "Recurring Data Set Project" [on residential services]. This Project has conducted state surveys to gather statistics on persons with mental retardation in state and nonstate-operated residential facilities since 1978, in addition to other data gathering and analysis projects. Reports of statistics from the Recurring Data Set Project over the last year which are included in this package are: Report #30, *Persons With Mental Retardation and Related Conditions in State-Operated Residential Facilities: Year Ending June 30, 1988 With Longitudinal Trends from 1950 to 1988*; Report #27, *Medicaid Services for Persons With Mental Retardation and Related Conditions*; Report #28, *Living in the Community*; and Report #29, *Persons With Mental Retardation and Related Conditions in Mental Retardation Facilities*. We are in the process of preparing and will send to you before too long reports for FY 1988 on utilization of both state and nonstate residential facilities by size, type and ICF-MR certification. Additional copies of any of these reports, or any of the other CRCS reports listed on the enclosed publications list, are available to you free upon request. Needless to say, your assistance is indispensable to our Project and your effort is greatly appreciated.

We have enclosed this year's questionnaire requesting data for Fiscal Year 1989. It again consists of three parts. Part 1 asks for data regarding state-operated facilities; Part 2 asks for data on nonstate-operated facilities (usually private, but in some states operated by counties or regional agencies); Part 3 asks for additional data on state and nonstate ICF-MR certified facilities (ICF-MR certified facilities should also be included in Parts 1 and 2).

We would greatly appreciate receiving the completed questionnaire by April 30, 1990, if at all possible. If you have any questions about any aspect of this survey, please call **Carolyn White** (612-624-5510) or **Charlie Lakin** (612-624-5005). Please return completed surveys or individual sections, using the enclosed envelope to Carolyn White, CRCS, 207 Pattee Hall, 150 Pillsbury Drive SE, Minneapolis, MN 55455.

Thank you for your help in completing this survey. We assure you these data are widely used within state and federal government agencies, and within advocacy and academic organizations as providing the up-to-date overview of residential services in the various states and the nation as a whole. As usual, we will send you a summary of state statistics before the report is published for confirmation of all data you provide.

Sincerely,

Carolyn White
Project Coordinator

Enclosures

RECURRING DATA SET - FISCAL YEAR 1989

Part 1. Residents with Mental Retardation and Related Conditions (MR/RC) in State-Operated Residential Facilities

Please mark estimated numbers with an "e"; if data are not available for specific cells, please mark "UNK" (unknown); use "0" to indicate "0".
If data provided are from a date other than 6-30-89, please indicate date used: _____.

	Small (1-15 bed) state-operated MR facilities			Large (16+ bed) state-operated MR facilities and large facilities with special MR units	Other state-operated facilities* serving one or more persons with MR (not in special MR units)
	1-6 beds	7-15 beds	Total 1-15 beds		
NUMBER of state-operated (staffed by state employees) facilities on June 30, 1989	+	=			
RESIDENTS with MR/RC on roll** beginning of year (7-1-88)	+	=			
FIRST ADMISSIONS--the number of residents with MR/RC admitted between 7-1-88 and 6-30-89 who had <u>never before</u> lived in any of your state-operated facilities. Please <u>do not</u> include respite care residents or transfers between state-operated facilities.	+	=			
READMISSIONS--the number of residents with MR/RC who had at one time lived in a state-operated facility and were readmitted to a state-operated facility from a nonstate-operated facility between 7-1-88 and 6-30-89.	+	=			
RELEASES--the number of residents with MR/RC who were released and removed from the rolls of state-operated facilities between 7-1-88 and 6-30-89. Please <u>do not</u> include releases from respite care or transfers to other state-operated facilities.	+	=			
DEATHS--the number of residents with MR/RC who died while on roll (7-1-88 to 6-30-89).	+	=			
RESIDENTS with MR/RC on roll** end of year (6-30-89)	+	=			
AVERAGE DAILY RESIDENTS with MR/RC on site in Fiscal Year 1989	+	=			
PER DIEM (average daily cost of care per resident)	+	=			

*A state-operated residential facility designated primarily for persons with disabilities other than mental retardation (e.g., a mental health facility) but in which resides one or more persons with a primary diagnosis of, or formal dual diagnosis including, mental retardation, not in a special MR unit.

**Includes residents on temporary leave or trial placement that lasted less than one year.

If your definitions differ from those above, please explain _____

Completed by: _____

Phone: _____

Please return to: Carolyn White
CRCS - University of Minnesota
207 Pattee Hall
150 Pillsbury Drive SE
Minneapolis, MN 55455

Sent to: _____

APPENDIX B

State Notes

- CA First admission data may include some individuals who previously lived in a state-operated facility but had been discharged. Per diem costs are based on midyear rates.
- CO Movement and cost data for small and large facilities are combined in Colorado reports. Releases include transfers.
- GA Georgia has eight physically separate facilities that are considered to be separate for licensing purposes. Two of the facilities have "sister" facilities that share administration. Southwestern State Hospital Thomasville (a mental health facility with a unit serving persons with mental retardation) shares administration with Bainbridge State Hospital and School (a facility exclusively for persons with mental retardation). Georgia Retardation Center-Atlanta shares administration with Georgia Retardation Center-Athens. Both of these facilities serve only mentally retarded populations. Georgia also has group residences that are state funded, contracted to local Boards of Health for operation, and staffed by county employees who work under state guidelines and the state merit system. These facilities are not included in this report.
- IL Per diem reflects general revenue allowable expenses for reimbursement purposes.
- MS Small (1-6 bed) facilities include apartment units as well as small group homes.
- NY Data are for fiscal year ending March 31.
- TX Data are reported for fiscal year ending on August 31. The reported average daily population estimates were used also for beginning and end of year population estimates. No movement data were provided for small PRF/MR; movement statistics for large PRF/MR are based on data provided by Texas for Fiscal Year 1988.

APPENDIX C

Procedures, Assumptions, and Limitations in Longitudinal Data Presentation

The following notes refer to the statistics used to develop Figures 3.1-3.4 of Part 3 of this report. The notes appear under the Figure to which they pertain. Full citation of these documents referred to here are found in the "References" section of this report.

Figure 3.1: Average Daily Population of in Large State-Operated Mental Retardation Facilities.

Data presented in Figure 3.1 for years 1950, 1955, 1960, 1965, and 1967 are from the National Institute of Mental Health, "Patients in Institutions." Data for nonreporting facilities were proportionally adjusted from the data of reporting facilities. Data for 1970 are from Office of Mental Retardation (Current Facility Reports) and NIMH (1975). Data for 1973 are from Scheerenberger (1974) and NIMH (1975). Data for 1977 are from Scheerenberger (1978) and NIMH (1979). Data for 1978-1989 are from the Recurring Data Set Project of the Center for Residential and Community Services in this series.

Because of the rapidly dwindling numbers of people with mental retardation in mental hospital units not primarily for people with mental retardation, and because of the tendency toward regionalization of state facilities (whereby a facility is used for both mentally retarded and mentally ill populations in a particular catchment area), a clear distinction between PRF/MR and PRF/Other cannot always be made. For example, in FY 1986 state-operated facilities in both Minnesota and Indiana were reclassified from PRF/Other to PRF/MR. For comparability in the most recent statistics, data from the Minnesota and Indiana facilities classified as PRF/Other in 1984 and 1985, but as PRF/MR in 1986, have been incorporated into the longitudinal movement data for FY 1984 and FY 1986. Some minimal duplicative counting may have occurred in the 1960s and 1970s in the statistics of mental retardation facilities and units for people with mental retardation within mental health facilities. After 1977 state reported statistics on PRF/Other evidenced two problems leading to some degree of undercounting: 1) a number of states were unable to report statistics on persons with mental retardation in PRF/Other, and 2) respondents were asked only to report persons with mental retardation in facilities with 10 or more mentally retarded residents (until 1987). The former problem has improved considerably in the last few years, the latter has a minor effect on statistical trends after 1977.

Totals for the mentally retarded population of PRF/Other for nonreporting facilities for the years 1950-1977 were estimated from the totals of reporting facilities. During this period, the facility response rate for the annual NIMH surveys was never less than 87.7%. Totals for the mentally retarded population of PRF/Other for nonreporting states for the years 1980-1986 were estimated from the totals of reporting states. During this period the number of states not reporting PRF/Other populations ranged from 2 to 8. In FY 1987, average daily residents of PRF/Other were estimated by 12 states, in 1988 by 10 states and in 1989 by 12 states. States providing estimates for FY 1989 are indicated by an "e" in Part 1.

Figure 3.2: Average Daily Population of Large State-Operated Mental Retardation Facilities per 100,000 of the General Population.

The statistics presented in Figure 3.2 are drawn from the same sources as the statistics presented in Figure 3.1. The average daily resident population statistics have been indexed by the Bureau of the Census population statistics for U.S. population in 100,000s for each year presented in Figure 1. (See Bureau of the Census. *Statistical Abstract of the United States* [annual]. Washington, DC: U.S. Government Printing Office.) The value of these statistics is that it controls increases and decreases in the use of state institutions for growth in population.

Figure 3.3: Movement Patterns in Large State-Operated Mental Retardation Residential Facilities.

Data for total admissions, discharges, and deaths are from National Institute of Mental Health reports from 1950-1967, Administration on Developmental Disabilities surveys for 1968-1970; National Association of Superintendents (Scheerenberger) survey for 1974; Center for Residential and Community Services surveys for 1978-1989. Estimations were made for nonreporting states by assuming rates of first admissions, readmission, and discharge equal to those of reporting facilities.

Figure 3.4: Average Annual Per Resident Cost of Care in Large State-Operated Mental Retardation Facilities.

Data for Figure 3.4 come from the same sources as the statistics on populations of state-operated mental retardation facilities reported in Figure 3.1. Missing data were minimal (reporting rates were 95% or greater for data elements). Because points are means of state averages until 1984, no adjustments were made for nonreporting facilities. State cost statistics for 1984 through 1989 have been weighted by the number of PRF/MR residents in that state. Adjustments of cost to 1967 dollars are based on the Department of Labor's Consumer Price Index multipliers, as reported in the Statistical Abstract of the United States (published annually by the U.S. Bureau of the Census).